FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

DOCUMENT # **646209** **(7)**

1. Corporate Name
DESIGN/KITCHENS OF NAPLES, INC.

APPROVED AND FILED

95 MAY -1 PM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1673 PINE RIDGE RD
NAPLES FL 33942

Mailing Address
1673 PINE RIDGE RD
NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/27/1979**

3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. # etc. — 22

Suite, Apt. # etc. — 27

City & State — 23

City & State — 28

24 25 29 30

4. FEI Number: **59-1953863** — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

KEITT, JOHN K.
1673 PINE RIDGE ROAD
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 and 607.0506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and hereby accept the duties and responsibilities of registered agent under Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KEITT, JOHN K.
STREET ADDRESS	1673 PINE RIDGE RD.
CITY, STATE, ZIP	NAPLES FL
TITLE	VD
NAME	KEITT, NANCY M.
STREET ADDRESS	1673 PINE RIDGE RD
CITY, STATE, ZIP	NAPLES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14. I hereby certify that the officers listed above are the officers elected and have not resigned or been removed from office as officers of this corporation. I further certify that the information contained in the annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath. That I am familiar with the duties and responsibilities of officers and directors as required by Chapter 607, Florida Statutes, and that my name appears above, or on attachments hereto, is sufficient for purposes of filing the annual report