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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 831763

(8)

KENNETH BALK & ASSOCIATES, INC.

FILED
May 15 1997 8:00am
Secretary of State

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1066 EXECUT STE 200 ST LOUIS MO		Mailing Ar P.O. BOX ST. LOUIS US	ddress 419036, N/A MO 63141-803	18	- 112					
US							3. Date incorporated or Quali 02/05/1974		ite of La 29/199	st Report 36
	Place of Business	26. Mailing	g Address				4. FEI Number	·		Applied For
Suite, Apt	· # ptc	26 Suite	Apt. #, etc.				43-0786779		60.	Not Applicable 75 Additional
22	в, ск,	27	Apr. #1 0101				5. Certificate of Status Desire	d 🗀		e Required
City & Sta	ite	City &	State				6. Election Campaign Financi	ng 🗂		00 May Be
23 Ζιρ	Country	28		T Cou	intry	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	L_J		ded to Fees
24	25	29		30			8. This corporation has liabilit Florida Statutes		No	iers. 199.032,
	9. Name and Address of Curren		gent	15.51	Ι		10. Name and Address of Ne			
TH	E PRENTICE-HALL CORPORATION	n system, in	IC.		81 N	Name				
120	01 HAYS STREET				82 S	treet Addre	ess (P.O. Box Number is Not Acc	eptable)	·	
	ITE 105									
TAI	LLAHASSEE FL 32301				63					
					84 C	City		F*1	85	Zip Code
44 /Lucanon	to the provisions of Sections 607.050 registered agent, or both, in the State	0 and 007 1500	Closide Statu	don the al	<u> </u>	amad aara	protion authority this statement for	FL.	2000	no its conintered
SIGNATURE										
12.	Signature type the printed name of registered age OFFICERS ANI			TE Registere 13.	d Agent s		d when reinstating) ADDITIONS/CHANGES TO (DATE OFFICERS AND		
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I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I turther certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STRPHON C

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