

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000004265 1. Entity Name KAISER PROPERTIES, INC.	
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Principal Place of Business 3479 GULF SHORES PARKWAY, STE. B GULF SHORES, AL 36542	Mailing Address 3479 GULF SHORES PARKWAY, STE. B GULF SHORES, AL 36542
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01122004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 63-1133654	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**THOMPSON, PAUL M
16549 PERDIDO KEY DR. UNIT 602
PENSACOLA, FL 32507**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP KAISER, ANTHONY P 3479 GULF SHORES PARKWAY, STE. B GULF SHORES, AL 36542
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCVP KAISER, BARTON E 3479 GULF SHORES PARKWAY, STE. B GULF SHORES, AL 36542
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAISER, PAUL G III PO BOX 1186 FOLEY, AL 36536
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KAISER, BARTON E 3479 GULF SHORES PARKWAY, STE. B GULF SHORES, AL 36542
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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03/29/04-80056-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARTON E. KAISER

3-18-04

Date

251.968.4300

Daytime Phone #