

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 18 PH 5:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000004259 (7)

1. Corporation Name

KIRK LEASING CORP.

Principal Place of Business

3313 E. 83RD PL.
MERRILLVILLE IN 46410

Mailing Address

3313 E. 83RD PL.
MERRILLVILLE IN 46410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/17/1994

3a. Date of Last Report

N/A

4. FEI Number

35-1333310

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 100.032,
Florida Statutes Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAPITAL CORPORATE SERVICES, INC.
633 TIMBERLANE RD.
TALLAHASSEE FL 32312

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 Sections 607.0502 and 607.1508, 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 accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed name, printed name of registered agent, and the 7.0505 fee)

(Signature, typed name, printed name of registered agent, and the 7.0505 fee)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

PTD

KIRK, EDWARD A

4913 E. 97TH AVE.

CROWN POINT IN 48307

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

☐ Change

☐ Addition

15. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

VSD

KIRK, LESLEE L

4913 E. 97TH AVE.

CROWN POINT IN 48307

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

☐ Change

☐ Addition

16. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

KIRK, JOSEPH T

6670 E. 85TH CT.

MERRILLVILLE IN 46410

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

☐ Change

☐ Addition

17. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

☐ Change

☐ Addition

18. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

☐ Change

☐ Addition

19. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information submitted 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 on Block 12 or Block 13 as required, or as an attachment with an address.

SIGNATURE:

Edward A. Kirk

Edward A. Kirk

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-95

Date

219-942-0044

Telephone Number