

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F94000006495
1. Corporation Name

KHB Corporation, Inc.

Principal Place of Business
28471 U.S. 19 N.
Clearwater, FL 34621

Mailing Address same

97 MAR 27 AM 7:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MWB

3. Date Incorporated or Qualified 12/20/94	3a. Date of Last Report 3/7/97
4. FEI Number 06-1401572	Applied For Not Applicable
5. Certificate of Status Desired XX	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

Robert A. Bullard
28471 U.S. 19 N.
Clearwater, FL 34621

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 *Robert A. Bullard* DATE 3/7/97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD Johnson, Janet <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4241 Waterscape Dr.	1.2 NAME	
STREET ADDRESS	Palm Harbor, FL 34685	1.3 STREET ADDRESS	
CITY- ST- ZIP		1.4 CITY- ST- ZIP	
TITLE	SD Howe, Stephen <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	45 School St.	2.2 NAME	300002127633--9
STREET ADDRESS	Boston, MA 02108	2.3 STREET ADDRESS	-03/28/97--01127--003
CITY- ST- ZIP		2.4 CITY- ST- ZIP	****208.75 ****208.75
TITLE	TD Bullard, Robert A. <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3962 Arlington Dr.	3.2 NAME	300002127633--9
STREET ADDRESS	Palm Harbor, 34685	3.3 STREET ADDRESS	-03/28/97--01127--004
CITY- ST- ZIP		3.4 CITY- ST- ZIP	****173.75 ****173.75
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. 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 further 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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert A. Bullard*
ROBERT A. BULLARD

3/7/97 813-791-3942

Date Daytime Phone #

CR2E034 (9/96)

F 9400000 6495
K H B
CORPORATION, INC.

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COPY

28471 US 19 North, Clearwater, FL 34621-2517

dba A.T. Whitehead, Ltd.
dba Janet Johnson, Ltd.

March 7, 1997

Tel: 813 • 791 • 3942
Fax: 813 • 796 • 8499

Florida Department of State
Division of Corporations
Corporate Records - Reinstatement Section
Box 6327
Tallahassee, FL 32314

Re: Document No. F94000006495
Federal ID No. 06-1401572

Enclosed are our our annual statements for 1996 and 1997 and a copy of my letter of May 31, 1995, changing our location and our mailing address. Our checks are attached as follows:

Check no. 3660

1996 Annual Report	\$200.00
Certificate of Status	<u>8.75</u>
	\$208.75

Check no. 3661

1997 Annual Report	\$165.00
Certificate of Status	<u>8.75</u>
	\$173.75

We discovered this lapse just this week when we received an inquiry from Dun & Bradstreet who were updating our file. After speaking to your Reinstatement Section and being advised that we were delinquent, we checked our files and found that an error occurred in your office when our location address was changed per my letter of May 31, 1995, but our mail address was not changed.

Please process our reinstatement without penalty.

Yours truly,

Robert A. Bullard
Treasurer