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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F9600000582 (4) DOCUMENT #

KLEIN DEVELOPMENT COMPANY, U.S.A.

Principal Place of Business

Mailing Address

FILED Mar 16 1998 8:00am Secretary of State



COLUMBUS (HENDERSON RD #5176 DH 43220	1550 OLD W HENDERSON COLUMBUS OH 43220	RD #517	6		
(y,, 4022y	OOLOMOUS ON 43220			DO NOT WRITE IN THIS SPACE.	
					3. Date Incorporated or Qualified	
					02/05/1996	
—	lace of Business	2a. Mailing Address		NO.	4. FEI Number Applied I	For
21 65 4		y 26 6543 COV	Mercha	e Th	4. FET Number Applied 31-0974932 Not Appl	licable
Suite, Apt.	W, etc.	T Suite Ant # etc			5 Certificate of Status Desired Status Desired Status Desired	
	iTe T	27 Suite			Fee Required	1
City & State	ublin Ohlo	City & State	OL		6. Election Campaign Financing \$5.00 May E	3e
23 <u>7</u> 2		28 Dublin		0	Trust Fund Contribution Added to Feet	
	Country	7ip	Countr	•	8. This corporation owes or has paid the current year Intangible	е.
24 430	9. Name and Address of Current	29 43017 3	10 Fr	ankl	Personal Property Tax due June 30. Yes No. 10. Name and Address of New Registered Agent	Nife
KLEIN, PETER M 81 Name						
	D LELY UNIT 1 P.O.A			1 1441110		
-	ELY BLVD		82	Street A	et Address (P.O. Box Number is Not Acceptable)	
	NITA SPRINGS FL 33923		83			
ьо	MITA OFFINGS FL 33823		"	1		i
			84	City	Fi 85 Zip Code	
11. Pursuant t	to the provisions of Sections 607.0502	and 607 1508 Florida Statutos	the abov	re-named	ed corporation submits this statement for the purpose of changing its regis	loro d
Unice or re	egistered agent, or both, in the State o	i Fiorida Such Change was au	tnorized b	ov the corp	orporation's board of directors. I hereby accept the appointment as registe	stered]
agent I am familiar with accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature, typod or printed name of registered agost	and tille if and abir (NOTE)	Registered Ac	and ringature	ure required when reinslating) DATE	
12.	OFFICERS AND	CONT. N. C. A. C	13.	John Brightalione	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCP	☐ DELETE	1.1 TITLE		""	ddition
NAME	KLEIN, PETER M		1.2 NAME	1		
STREET ADDRESS	1550 OLD W HENDERSON RD	# \$176	1-3-51015	LADDRESS	5 6543 Commence Pankway Sutte	: ~
CITY-ST-ZIP	COLUMBUS OH 43220	~ 	1.4 CITY-			
TITLE	DV	☐ DELFTE	2.1 TITLE		Boll all all all all all all all all all	ddition
NAME	KLEIN, RETA M		2.2 NAME			
STREET ADDRESS	1550 OLD W HENDERSON RD	#\$176	2.3 S160	DDRESS	6 6543 Commerce Parkway Su'T	6 1
CITY-ST-ZIP	COLUMBUS OH 43220		2 4 CITY	ST-ZIP	Dublin Olivo 43017	
TITLE	DST	☐ DELETE	3 1 TITLE		Dublin Ohio 43017	ddition
NAME	KLEIN, PAUL L		32 NAME	-	On the first	· ~
STREET ADDRESS	1550 OLD W HENDERSON RD	#S176	225	DOORESS	6543 Commerce Farkway	`` '
CHTY-ST-ZIP	COLUMBUS OH 43220		34. CITY-	ST~ZIP	5 6543 Commerce Parkway Svit Diblin Ohio 43017	
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CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
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TITLE		☐ DELETE	6.1 TITLE		Change A	ddition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS	S	
CITY-ST-ZIP	eville that the information and I do in		6.4 CITY-	ST-ZIP		

I nereby cortity 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:

1-19-90