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

DOCUMENT #

F96000001664 (9)

' C.R. KLEWIN, INC.

Mailing Address

Principal Place of Business **40 CONNECTICUT AVENUE**

40 CONNECTICUT AVENUE

FILED Oct 16 1998 8:00am Secretary of State



NORWICH CT 06\$60		NORWICH CT 06360				DO NOT WRITE IN THI S S PACE			
						3. Date Incorporated or Qualified 04/02/1996			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26	26			06-1065117		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State	е	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution			
Zip	Country	Zip	Cour	ıtry		8. This corporation owes or has paid the curre	nt year	Intangible	
24	25	29	30			Personal Property Tax due June 30.	Yes	□ No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered A	gent		
UC	C FILING & SEARCH SERVICES	S. INC.		81	Name				
	6 EAST PARK AVE.	• • • • • • • • • • • • • • • • • • • •	-	82	Street Add	dress (P.O. Box Number is Not Acceptable)			
STE. 200				-		dissipation of the contract of			
	LLAHASSEE FL 32302		[83					
	· · · · · · · · · · · · · · · · · · ·		-	84	City		85 Zi	p Code	
				_	,	FL			
11. Pursuant office or ragent. La	to the provisions of Sections 607.05 regi ste red agent, or both, in the Stat m f am iliar with, and accept the oblig	02 and 607,1508, Florida Statu e of Florida. Such change was gations of, Section 607,0505, F	utes, the ab s authorized Torida Statu	ove Lby ites	enamed co the corpora s.	orporation submits this statement for the purpose of cation's board of directors. I hereby accept the apporation's	:hanging intment a) its registered as registered	
SIGNATURE						DATE			
40	Signature typed or present name of registered as	pent and title if applicable (NO ND DIRECTORS	DIE Registered	Age	nt signature req	DATE ADDITIONS/CHANGES TO OFFICERS AND I	DIBECTO	ORS IN 12	
12.	OFFICE HS AF	DELETE	11 100		T		Change		
NAME	D'AMATO, MICHAEL J		1 2 NA			_	_ ,		
	40 CONNECTICUT AVENUE				ADDRESS				
STREET ADDRESS	NORWICH CT		1401		i				
CHY-S1-7IP TITLE	V	DELETE	2 1 IJH		1.10		Change	e 🔲 Addition	
NAME	DUVAL, FERN		22 NA						
STREET ADDRESS	40 CONNECTICUT AVENUE				ADDRESS				
City-St-7#	NORWICH CT		2 4 CH		- 1				
TILE	81	DELETE	3110				Change	e 🔲 Addition	
NAME	BAWYER, JAMES E		3.2 NAI	ΜF	1				
STREET ADDRESS	40 CONNECTICUT AVENUE		33516	ŒĽI	ADDRESS				
C-TY-ST-7IP	NORWICH CT		3 4 . CIT	Y-8	ST - ZIP				
TITLE	CD	☐ DELEVE	4 1 111	LE		90000266631	, Chang	e Addition	
NAME	KLEWIN, CHARLES R		4. 2 NA	ME		- 1 0/19/9801006- 0 /	15		
STREET ADDRESS	40 CONNECTICUT AVENUE		43 S1F	ŒFT	ADDRESS	***558.7S			
CHY-ST-ZIP	NORWICH CT		4.4 Cil	Y - S	r - ZIP				
TITLE		DELETE	5.1 TITI	LE			Chang	e 🔲 Addition	
NAME			5.2 NAI	MF					
STREET ADDRESS			5.3 STE	KEET	ADDRESS				
CITY-ST-ZIF			5.4 CII	Y - S	J · ZIP				
THILE		☐ DELETE	6.1 TIT	LĒ	Γ	. [Chang	c Addition	
NAME			6.2 NAI	ME			•	イン	
STREET ADDRESS			6.3 STR	RET	ADDRESS			John S	
CITY+ST-ZIP			6.4 CIT	Y-S	iT - ZIP			-10119	

14. Thereby 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.