FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **G06438** **(7)**

1. Corporation Name

KURT SCHMIDT ENTERPRISES, INC.

Principal Place of Business

730 HIGHLINE DRIVE
PANAMA CITY FL 32404

Mailing Address

730 HIGHLINE DRIVE
PANAMA CITY FL 32404

3. Date Incorporated or Qualified: **10/29/1982**

3a. Date of Last Report: **03/27/1995**

2. Principal Place of Business
21

Suite, Apt. #, etc.
22

City & State
23

Zip 24 | County 25

2a. Mailing Address
26

Suite, Apt. #, etc.
27

City & State
28

Zip 29 | County 30

4. FEI Number: **59-2234766** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SCHMIDT, KURT
730 HIGH LINE DR.
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

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 or 617.1502, 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TYPE	D	☐ DELETE	☐ Change ☐ Addition
NAME	SCHMIDT, HILDEGARD		
STREET ADDRESS	730 HIGHLINE DR.		
CITY-ST-ZIP	PANAMA CITY FL		
TYPE	PD	☐ DELETE	☐ Change ☐ Addition
NAME	SCHMIDT, KURT		
STREET ADDRESS	730 HIGHLINE DR.		
CITY-ST-ZIP	PANAMA CITY FL		
TYPE	V	☐ DELETE	☑ Change ☐ Addition
NAME	SCHMIDT, GEORG		Schmidt, Georg
STREET ADDRESS	718 S GAY AVE APT A-1		730 Highline Dr.
CITY-ST-ZIP	PANAMA CITY FL		Panama City, FL 32404
TYPE		☐ DELETE	☐ Change ☑ Addition
NAME			Brigitte Hartsfield
STREET ADDRESS			730 Highline Dr.
CITY-ST-ZIP			Panama City, FL 32404
TYPE		☐ DELETE	☐ Change ☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TYPE		☐ DELETE	☐ Change ☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

CR2E034 (12/95)

14. I hereby certify that the information supplied with this filing is authorized, and that it 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 with an address, with respect to, the officer or director listed above.

SIGNATURE: Kurt Schmidt P.D 2.2.96. (904) 769-5192

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #