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

DOCL	IMENIT	H

1. Corporation	MENT # H333{ R KENNEDY CONSTRUCTION	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		A MANIALI ANDA AMBA AMBA AMBA AMBA AMBA	18 töll Bíðij Bíðij Bíðin Ótbin Gröll Bíðij Bíðir toba
Principal Place	of Rusiness	Mailing Address			
·	ITH LAKE BLVD.	270 S. NORTH LAK STE. 1008	E BLVD.		
ALTAMONTE SPRINGS FL 32701 ALTAMONTE SPRINGS F		IGS FL 32701	Date Incorporated or Qualified	3a. Date of Last Report	
03		US		12/10/1984	04/18/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.		59-2479056	Not Applicable \$8.75 Additional
2		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	This corporation has liability for in	Added to Fees
4	9. Name and Address of Curren	29	30	Florida Statutes X Yes	□ No
	9. Name and Address of Curren	r Hegistered Agent	81 Name	10. Name and Address of New Re	egistered Agent
KNADLI	E, MICHAEL D.			ress (P.O. Box Number is Not Acceptable	a)
	NORTH LAKE BLVD.			ress (r. c. Dex Northber is Not Acceptable	ъ,
STE. 10	= ' = ' · · · · · · · · · · · · · · · ·		83		
ALIAM	ONTE SPRINGS FL 32701		84 City		FL 85 Zip Code
familiar with	so agent, or both, in the state of Florid n, and accept the obligations of, Section Spharuse, typed or printed hame of registered agent a	a. Such change was authori on 607.0505, Florida Statute		ration submits this statement for the purp rd of directors. I hereby accept the appo	intment as registered agent. I am
12.	OFFICIERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TOLE	PD PAIADLE MOUVELD	☐ DELETE	1. 1 TITLE		Change Addition
NAME STREET ADDRESS	KNADLE, MICHAEL D. 270 S. NORTH LAKE BLVD.,	STE 1008	1.2 NAME		
CHY-SI-ZIP	ALTAMONTE SPRINGS FL	O12. 1000	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
ITLE	VDT	☐ DELETE	2. 1 TITLE		Change Addition
NAME	KENNEDY, ROGER B.	OTC 4000	2.2 NAME		
STREET ADDRESS CITY - ST - ZIP	270 S. NORTH LAKE BLVD., ALTAMONTE SPRINGS FL	SIE. 1008	2.3 STREET ADDRESS		
ITLE	AS	DELETE	2.4 C/TY - ST - Z/P 3.1 TITLE	. <u></u>	Change Addition
ıAMê	KENNEDY, JR. R		3.2 NAME		
STREET ADDRESS	270 S. NORTH LAKE BLVD.,	STE. 1008	3.3. STREET ADDRESS		
ITLE	VP ALIAMONIE SPRINGS FL	DELETE	3.4 CITY - ST - ZIP 4. 1 TITLE		Change C Million
IAME	Baron, Phillip G		4.2 NAME		Change Addition
TREET ADDRESS	270 S. NORTH LAKE BLVD.,	STE 1008	4.3 STREET ADDRESS		
oTY-ST-ZiP	ALTOMONTE SPRINGS FL		4.4 CITY - ST - ZIP		
ITLE	Asst. Vice Presid		5 1 TITLE		☐ Change ☐ Addition
AME STREET ADDRESS	Theroux, Deborah 270 S. North Lake		08 5.3 STREET ADDRESS		
ITY-ST-ZIP	Altamonte Springs	•	5.4 CITY-ST-ZIP		
IILE		DELETE	6. 1 TITLE		☐ Change ☐ Addition
IAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
ITY-ST-ZIP	certify that the information supplied w	ith this filing is voluntarily furr	6.4 CITY-ST-ZIP hished and does not qualify to	or the exemption stated in Section 119.0	7(3)(k) Florida Statutes 1 further
oath; that I	the information indicated on this annual am an officer or director of the corpora Block 12 or Block 13 if charged, or or	at report or supplemental ann ation or the receiver optruste	nual report is thue and accura- se empowered to execute this	te and that my signature shall have the s s report as required by Chapter 607, Flor	ame legal effect as if made under ida Statutes; and that my name
SIGNAT	JRE: SIGNATURE AND TYPED OR I	PRINTED NAME OF SIGNING OFFICE	ER OR DIRECTOR	4/8/96 (40	7) 831 - 8666 Daytime Proce #