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FILED  
May 11 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # H87163

(2)

1. Corporation Name

K&B FLORIDA CORPORATION

Principal Place of Business

K & B PLAZA  
LEE CIRCLE  
NEW ORLEANS LA 70130

Mailing Address

K & B PLAZA  
LEE CIRCLE  
NEW ORLEANS LA 70130

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/27/1985

4. FEI Number

72-1058893

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 P.O. Box 3165

Suite, Apt. #, etc.

22

City & State

23 HARRISBURG, PA

Zip

17103

Country

24

2a. Mailing Address

26 P.O. Box 3165

Suite, Apt. #, etc.

27

City & State

28 HARRISBURG, PA

Zip

17103

Country

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☒ DELETE

NAME BESTHOFF, SYDNEY J., III  
STREET ADDRESS 1055 ST. CHARLES AVE  
CITY-ST-ZIP NEW ORLEANS LA

TITLE V ☒ DELETE

NAME DYER, RONALD J.  
STREET ADDRESS 1055 ST. CHARLES AVE  
CITY-ST-ZIP NEW ORLEANS LA

TITLE P ☒ DELETE

NAME LEBLANC, JAMES  
STREET ADDRESS 1055 ST. CHARLES AVE  
CITY-ST-ZIP NEW ORLEANS LA

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☐ Change ☒ Addition

12 NAME CHARLES KIBLER  
13 STREET ADDRESS 30 HUNTER LANE  
14 CITY-ST-ZIP CAMP HILL, PA 17011

2.1 TITLE VD ☐ Change ☒ Addition

2.2 NAME FRANK BERGONZI  
2.3 STREET ADDRESS 30 HUNTER LANE  
2.4 CITY-ST-ZIP CAMP HILL, PA 17011

3.1 TITLE VT ☐ Change ☒ Addition

3.2 NAME JOSEPH SPEAKER  
3.3 STREET ADDRESS 30 HUNTER LANE  
3.4 CITY-ST-ZIP CAMP HILL, PA 17011

4.1 TITLE VS ☐ Change ☒ Addition

4.2 NAME I. LAWRENCE GELMAN  
4.3 STREET ADDRESS 30 HUNTER LANE  
4.4 CITY-ST-ZIP CAMP HILL PA 17011

5.1 TITLE D ☐ Change ☒ Addition

5.2 NAME FRANKLIN BROWN  
5.3 STREET ADDRESS 30 HUNTER LANE  
5.4 CITY-ST-ZIP Camp Hill, PA 17011

6.1 TITLE D ☐ Change ☒ Addition

6.2 NAME ELLIOT S. GELSON  
6.3 STREET ADDRESS 30 HUNTER LANE  
6.4 CITY-ST-ZIP Camp Hill, PA 17011

14. I 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.

CR2E034 (10/97)