

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H98058

(1)

1. Corporation Name

KIRBY KING CONSTRUCTION, INC.



Principal Place of Business

**434 SE 21ST PL
VERO BEACH FL 32962
US**

Mailing Address

**434 SE 21ST PLACE
VERO BEACH FL 32962
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
02/06/1986

3a. Date of Last Report
04/17/1995

4. FEI Number

59-2759941

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

**KING, ELIZABETH LYNN
11650 SW 68TH CT.
HOMESTEAD FL 33156**

10. Name and Address of New Registered Agent

81 Name **KING, ELIZABETH LYNN**
82 Street Address (P.O. Box Number is Not Acceptable)
434 SE 21 PL
83 **VERO BEACH**
84 City

FL 85 Zip Code
32962

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, this 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, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

KIRBY KING

Kirby King

3-25-96

12. OFFICERS AND DIRECTORS

TITLE	OP	☐ DELETE
NAME	KING, KIRBY	
STREET ADDRESS	434 SE 21ST PLACE	
CITY-STATE-ZIP	VERO BEACH FL	
TITLE	VP	☐ DELETE
NAME	ELIZABETH KING	
STREET ADDRESS	434 SE 21ST PLACE	
CITY-STATE-ZIP	VERO BEACH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13.

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	☐ Change ☐ Addition
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	☐ Change ☐ Addition
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	☐ Change ☐ Addition
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	☐ Change ☐ Addition
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	☐ Change ☐ Addition
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

KIRBY KING

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-25-96 407 5649418

Display Below

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