FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY 15 AM 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J08113 (9)

1. Corporation Name

K COUNTRY GAS N SHOP, INC.

Principal Place of Business	Mailing Address
1201 WEST CANAL ST. N. P.O. BOX 1625 BELLE GLADE FL 33430	1201 WEST CANAL ST. N. P.O. BOX 1625 BELLE GLADE FL 33430

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/08/1986	3a. Date of Last Report: 04/26/1994
4. FEI Number: ~~59-2209915~~ 59-2669915	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 qualifies for exemption ... Florida Statutes	☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

KIRCHMAN, P.A.
1201 WEST CANAL ST. NORTH
BELLE GLADE FL 33430

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] T E Kirchman Sec./Treas. 5-10-95

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	KIRCHMAN, P.A.
STREET ADDRESS	1201 W. CANAL ST. N.
CITY-ST-ZIP	BELLE GLADE FL
TITLE	STD
NAME	KIRCHMAN, TERRY E.
STREET ADDRESS	1201 W. CANAL ST. N.
CITY-ST-ZIP	BELLE GLADE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (blank)

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)(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.

SIGNATURE: [signature] Terry E. Kirchman 5-10-95 407-996-2033

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0203709 CP