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 # **J85463** **(4)**

1. Corporation Name

E. S. AND K., INC.

Principal Place of Business	Mailing Address
530 S. 41 BY PASS S-2A VENICE FL 34292 US	530 S. 41 BY PASS S-2A VENICE FL 34292 US

2. Principal Place of Business [21] — Suite, Apt. #, etc. [22] — City & State [23] — Zip [24] — Country [25]

2a. Mailing Address [26] — Suite, Apt. #, etc. [27] — City & State [28] — Zip [29] — Country [30]

3. Date Incorporated or Qualified: **07/22/1987**

3a. Date of Last Report: **03/14/1995**

4. FEI Number: **59-2835205** ☐ 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**

FETTERMAN, JAMES C
4525 PARNELL DR.
515 S. WASHINGTON BLVD (B)
SARASOTA FL 34232

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 617.0502, 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

TITLE	DVS	☐ DELETE
NAME	BURKHOLDER, ELI	
STREET ADDRESS	1500 INGRHAM AVE	
CITY-ST-ZIP	SARASOTA FL	
TITLE	DPT	☐ DELETE
NAME	BURKHOLDER, SARAH	
STREET ADDRESS	1500 INGRAM AVE	
CITY-ST-ZIP	SARASOTA FL	
TITLE	V	☐ DELETE
NAME	BURKHOLDER, WENDELL KATIE	
STREET ADDRESS	1500 INGRAM AVENUE	
CITY-ST-ZIP	SARASOTA FL	
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 TITLE		☐ Change ☐ Addition
1 NAME		
1 STREET ADDRESS		
1 CITY-ST-ZIP		
2 TITLE		☐ Change ☐ Addition
2 NAME		
2 STREET ADDRESS		
2 CITY-ST-ZIP		
3 TITLE		☐ Change ☐ Addition
3 NAME		
3 STREET ADDRESS		
3 CITY-ST-ZIP		
4 TITLE		☐ Change ☐ Addition
4 NAME		
4 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		☐ Change ☐ Addition
5 NAME		
5 STREET ADDRESS		
5 CITY-ST-ZIP		
6 TITLE		☐ Change ☐ Addition
6 NAME		
6 STREET ADDRESS		
6 CITY-ST-ZIP		

14. I 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: Eli Burkholder V. (Eli Burkholder V.) 2-1-96 941-485-5544
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)