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FILED

Feb 10 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 # K05199 (0)
1. Corporation Name
K C CONSTRUCTION OF NAPLES, INC.

Principal Place of Business

Mailing Address

~~5037 TURTLE BAY DR~~
P.O. BOX 9954
NAPLES FL 33941

~~5037 TURTLE BAY DR~~
P.O. BOX 9954
NAPLES FL 33941

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/07/1987

4. FEI Number

65-0033448

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

2a. Mailing Address

21 25415 ALICANTE DR.

26 P.O. Box 9954

22 Suite, Apt. #, etc. BONITA SPRINGS, FL.

27 Suite, Apt. #, etc. NAPLES, FL

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

34134

LEE

34134

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHEVILLET, WALTER
~~5037 TURTLE BAY DR, #10~~
~~NAPLES FL 33963~~

81 Name

CHEVILLET, WALTER

82 Street Address (P.O. Box Number is Not Acceptable)

25415 ALICANTE DR.

83

84 City

BONITA SPRINGS

FL

85 Zip Code

34134

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 Walter L. Chevillet

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

(NOTE: Registered Agent signature required when reinstating)

2-3-98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME D
KISSELL, STEVEN
STREET ADDRESS 5047 3RD AVENUE, N.W.
CITY-ST-ZIP NAPLES FL

TITLE ☐ DELETE

NAME D
CHEVILLET, WALTER
STREET ADDRESS ~~5037 TURTLE BAY DR~~
CITY-ST-ZIP ~~NAPLES FL~~

TITLE ☐ DELETE

NAME D
CHEVILLET, GERALDINE
STREET ADDRESS ~~5037 TURTLE BAY DRIVE~~
CITY-ST-ZIP ~~NAPLES 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

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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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

SIGNATURE: Walter L. Chevillet

2-3-98

941 9489119

CR2E034 (10/97)