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Apr 30 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** K55873 (9) KSW CORP. Mailing Address Principal Place of Business % RANDOLPH C. GARNER % RANDOLPH C. GARNER 1273 S. MILITARY TRAIL 1273 S. MILITARY TRAIL DO NOT WRITE IN THIS SPACE W. PALM BEACH FL 33415 W. PALM BEACH FL 33415 Date Incorporated or Qualified 01/05/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0188523 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 City & State Cily & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zıp Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name GARNER, RANDOLPH C. 1273 S. MILITARY TRAIL Street Address (P.O. Box Number is Not Acceptable) W. PALM BEACH FL 33415 83 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition DELETE 1.1 TITLE Change TITLE WESTON, KAREN S. 1.2 NAME NAME 1273 S. MILITARY TRAIL 1.3 STREET ADDRESS STREET ADDRESS W. PALM BEACH FL 14 CITY-ST-ZIP CITY-ST-ZIP DELETE 21 TITLE Change Addition TITLE NAME GARNER, RANDOLPH C. 2.2 NAME STREET ADDRESS 1273 S. MILITARY TRAIL 2 3 STREET ADDRESS W. PALM BEACH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETI Change Addition TITLE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELFTE Change Addition TITLE 4.1 TULE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS DITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 14. Thereby 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 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 supplied entire that I am an officer or director of the corporation of the co

FLORIDA DEPARTMENT OF STATE

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