

**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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAY 31 AM 9:37

DOCUMENT # **K73431** (4)

1. Corporation Name  
**KENNETH R. WEISER, INC.**

Principal Place of Business  
**292 SW MOLLOY TERRACE  
PORT ST. LUCIE FL 34984  
US**

Mailing Address  
**292 SW MOLLOY TERRACE  
PORT ST. LUCIE FL 34984  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**03/16/1989**

3a. Date of Last Report  
**06/27/1994**

4. FEI Number  
**65-0109882**

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 Q32, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WEISER, KENNETH R.  
292 SW MOLLOY TERRACE  
PORT ST. JOE FL 34984**

B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City **FL** B5 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 (Print or printed name of registered agent and the # 24#30#28#)

NOTE: Registered Agent signature required when new listing.

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>D</b>
NAME	<b>WEISER, KENNETH R.</b>
STREET ADDRESS	<b>292 SW MOLLOY TERRACE</b>
CITY ST ZIP	<b>PORT ST. LUCIE FL</b>
TITLE	<b>S</b>
NAME	<b>WEISER, LOIS A.</b>
STREET ADDRESS	<b>292 SW MOLLOY TERRACE</b>
CITY ST ZIP	<b>PORT ST. LUCIE FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2	NAME	
3	STREET ADDRESS	
4	CITY ST ZIP	
5	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6	NAME	
7	STREET ADDRESS	
8	CITY ST ZIP	
9	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10	NAME	
11	STREET ADDRESS	
12	CITY ST ZIP	
13	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14	NAME	
15	STREET ADDRESS	
16	CITY ST ZIP	
17	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18	NAME	
19	STREET ADDRESS	
20	CITY ST ZIP	

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 110.07(3)(j), 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 and authorized 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 addition.

SIGNATURE: **KENNETH R. WEISER** *[Signature]*

5-22-95 407-878-9438