

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 # **L11528** (1)

1. Corporation Name

KINZIE ISLAND CONSULTANTS, INC.



Principal Place of Business

**C/O KENNETH E. ELLENBERG
533 KINZIE ISLAND COURT
SANIBEL ISLAND FL 33957**

Mailing Address

**C/O KENNETH E. ELLENBERG
533 KINZIE ISLAND COURT
SANIBEL ISLAND FL 33957**

2. Principal Place of Business

2a. Mailing Address

21 **C/O KENNETH E. ELLENBERG**

26 **C/O KENNETH E. ELLENBERG**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **1238 ISABEL DRIVE**

27 **1238 ISABEL DRIVE**

City & State

City & State

23 **SANIBEL FL**

28 **SANIBEL FL**

Zip

Country

Zip

Country

24 **33957**

25 **LEE**

29 **33957**

30 **LEE**

9. Name and Address of Current Registered Agent

**ELLENBERG, KENNETH E.
533 KINZIE ISLAND COURT
SANIBEL ISLAND FL 33957**

3. Date Incorporated or Qualified

09/01/1989

3a. Date of Last Report

05/23/1995

4. FEI Number

65-0146190

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

10. Name and Address of New Registered Agent

81 Name

ELLENBERG, KENNETH E.

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

1238 ISABEL DRIVE

83

SANIBEL

84 City

SANIBEL

FL

85 Zip Code

33957

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

KENNETH E. ELLENBERG

Kenneth E. Ellenberg

3/21/96

Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent Signature must be written)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **ELLENBERG, KENNETH E.**
STREET ADDRESS **533 KINZIE ISLAND COURT**
CITY-ST-ZIP **SANIBEL ISLAND FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
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CITY-ST-ZIP

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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

1.1 TITLE **D** ☒ Change ☐ Addition
1.2 NAME **ELLENBERG, KENNETH E.**
1.3 STREET ADDRESS **1238 ISABEL DRIVE**
1.4 CITY-ST-ZIP **SANIBEL ISLAND FL 33957**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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:

Kenneth E. Ellenberg

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/96 941-395-9376

DATE

DAYTIME PHONE #

CR2E034 (12/95)