## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 04 1997 8:00am Secretary of State

K-NAN, INC.  Principal Place of Business  2000 INDIAN ROCKS RD.  ARGO FL 34644  Mailing Address  12000 INDIAN ROCKS RD  LARGO FL 33774-3215									
						3. Date Incorporated or Qualified 08/25/1989		te of Last I 7/1996	Report
	Prace of Business	28. Mailing A	ddress			4. FEI Number		<del> </del>	pplied For
1]		26				59-2968108			lot Applicable
– Suite, Ap ⊒	ot #, etc.	Suite, Apt	. #, etc.			5. Certificate of Status Desired			Additional Required
City & St	ale	27   City & Sta	ite			Election Campaign Financing	<del></del>		May Be
3		28				Trust Fund Contribution			to Fees
Zip	Country	Zip		Country		8. This corporation has liability for			s. 199.032,
4	25	29 of Current Registered Age	30	ם בייין		Florida Statutes  10. Name and Address of New F	Yes [		
KIE	RNAN, JOHN D.	or Current Negistered Age		81	Name	10. Name and Address of New F	Adistolen W	gent	
	SECOND AVENUE NOR	राभ		82	Street Add	dress (P.O. Box Number is Not Accept	able)		
ST.	PETERSBURG FL 33701	1			Silver Aug	JI 655 (1 .O. DOX NUITBEL IS NOT ACCEPT	aule)		
				83					
				84	City			<b>85</b> Zip	Code
I Purcusa	nt to the provisions of Section	ne 807 0502 and 607 1508 F	Inrida Statutes	the shove	a-named cor	poration submits this statement for the	FL.	changing	ite renistared
			07 0005	10012000	the corpora	ation's board of directors. I hereby acc	abrana abra		
SIGNAT URI	Signature, typed or proded name of	of the obligations of, Section 6	07.0505, Florid	la Statutes	i,	uired when reinstating)	DATE	DIRECTO	
SIGNATURI	Signature, typed or proded name of	registered agent and the if applicable ICERS AND DIRECTORS	07.0505, Florid	la Statutes	i,		DATE	DIRECTO	
SIGNATURI 12.	Signature, typest or profiled name of OFF PTD KIERNAN, JAMES P.	registreed agent and lite if applicable ICERS AND DIRECTORS	07.0505, Florid	da Statutes	i,	uired when reinstating)	DATE		
SIGNATURI 2.  IILE	Signature, typest or profiled name of OFF PTD KIERNAN, JAMES P. 13708 BARBADOS DR	registreed agent and lite if applicable ICERS AND DIRECTORS	07.0505, Florid	da Statuteś legistered Age 13. 1.1 TITLE	nt signature requ	uired when reinstating)	DATE		
SIGNAT UFRE 12. HILF HAME STREET ADORES CITY-ST-ZIP	PTD KIERNAN, JAMES P. 13708 BARBADOS DR	regioned agent and the if applicable ICERS AND DIRECTORS	O7. ÕSO5, Florid (NOTE: B DELETE	la Statutes  legistered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-S	ant signature requi	uired when reinstating)	DATE	☐ Change	Addition
BIGNAT UHH 12. HILF HAME STREET ADORES CITY-ST-ZIP HILE	PTD KIERNAN, JAMES P. 13708 BARBADOS DR LARGO FL VSD	regioned agent and the if applicable ICERS AND DIRECTORS	07.0505, Florid	la Statutes  13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE	ant signature requi	uired when reinstating)	DATE		Addition
SIGNAT URB 12. HILF HAME STREET ADDRES STREET	PTD KIERNAN, JAMES P. 13708 BARBADOS DR LARGO FL VSD KIERNAN, NANCY	registreed agent and little if applicable ICERS AND DIRECTORS	O7. ÕSO5, Florid (NOTE: B DELETE	la Statutes  13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME	ADORESS	uired when reinstating)	DATE	☐ Change	Addition
SIGNAT URB TILLE HAME STREET ADDRES CHY-SI-ZIP TILLE NAME STREET ADDRES	Signaturo, typest or profiled name of OFF  PTD  KIERNAN, JAMES P. 13708 BARBADOS DR  LARGO FL  VSD  KIERNAN, NANCY	registreed agent and little if applicable ICERS AND DIRECTORS	O7. ÕSO5, Florid (NOTE: B DELETE	la Statutes 13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET	ADDRESS ADDRESS	uired when reinstating)	DATE	☐ Change	Addition
SIGNAT URB TILLE HAME STREET ADDRES CHY-ST-ZIP TILLE NAME STREET ADDRES CITY-ST-ZIP	PTD KIERNAN, JAMES P. 13708 BARBADOS DR LARGO FL VSD KIERNAN, NANCY 13708 BARBADOS DR	regioned agent and lite if applicable ICERS AND DIRECTORS	O7. ÕSO5, Florid (NOTE: B DELETE	la Statutes  13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME	ADDRESS ADDRESS	uired when reinstating)	DATE	☐ Change	Addition
SIGNAT URB 12. HILE NAME STREET ADDRES CHY-SI-ZIP THLE NAME STREET ADDRES CITY-SI-ZIP THLE	PTD KIERNAN, JAMES P. 13708 BARBADOS DR LARGO FL VSD KIERNAN, NANCY 13708 BARBADOS DR	regioned agent and lite if applicable ICERS AND DIRECTORS	O7.ÕSOS, FIORICI (NOTE: B DELETE	la Statutes  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S	ADDRESS ADDRESS	uired when reinstating)	DATE	Change Change	Addition
SIGNAT URB  12.  THE  NAME STREET ADDRES CHY-ST-ZIP THE  NAME SIREET ADDRES CHY-ST-ZIP THE HAME STREET ADDRES	Signature, typical or product name of OFF  PTD  KIERNAN, JAMES P. 13708 BARBADOS DR  LARGO FL  VSD  KIERNAN, NANCY 13708 BARBADOS DR  LARGO FL	regioned agent and lite if applicable ICERS AND DIRECTORS	O7.ÕSOS, FIORICI (NOTE: B DELETE	13. 11 TITLE 12 NAME 13. STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET	ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS	uired when reinstating)	DATE	Change Change	Addition
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SIGNAT URB  12.  TILLE  NAME  STREET ADDRES  CITY-ST-ZIP  TILLE  NAME  SIREET ADDRES  CITY-ST-ZIP  TILLE  NAME  STREET ADDRES  CITY-ST-ZIP  TILLE	Signature, typical or product name of OFF  PTD  KIERNAN, JAMES P. 13708 BARBADOS DR  LARGO FL  VSD  KIERNAN, NANCY 13708 BARBADOS DR  LARGO FL	regioned agent and lite if applicable ICERS AND DIRECTORS	O7.ÕSOS, FIORICI (NOTE: B DELETE	13. 11 TITLE 12 NAME 13 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 3.4 CITY-S 4.1 TITLE 3.4 CITY-S 4.1 TITLE 3.5 NAME 3.5 TREET 3.5 NAME 3.5	ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS	uired when reinstating)	DATE	Change Change	Addition Addition
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SIGNAT URB  12.  THEF NAME STREET ADDRES CHY-SI-ZIP	PTD KIERNAN, JAMES P. 13708 BARBADOS DR LARGO FL VSD KIERNAN, NANCY 13708 BARBADOS DR LARGO FL SS	registreed agent and lite if applicable ICERS AND DIRECTORS	O7. ÖSOS, FIORICI (NOTE: B ) DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 13. STREET 1.4 CITY-S 21 TITLE 22 NAME 23 STREET 2. 4 CITY-S 31 TITLE 32 NAME 33 STREET 4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	uired when reinstating)	DATE	Change Change Change	Addition Addition Addition Addition
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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 13 if changed or on an attachment with an address.

SIGNATURE:

Daytime Phone #