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

DOCUMENT #

(5)

KIRBY BROTHERS ENTERPRISES, INC.

FILED	
May 12 1997 8:00ar	m
Secretary of State	

ncipal Place of Business	Mailing Address		
30 W. Baya ave.). Box 567 Ke City Fl 32055	1380 W BAYA AVE PO BOX 567 LAKE CITY FL 32056-0567		
	US	3. Date Incorporated or Qualified	3a. Date of Last Report
		11/29/1090	04/15/1006

2.	Principal Place of Business	28	a. Mailing Address		4. FEI Number Applied For
21		26			59-2978298 Not Applicable
22	Suite, Apl. #, etc.	27	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
23	City & State	28	City & State		6. Liection Campaign Financing \$5.00 May Be Trust Fund Contribution
24	Zip Country 25	29	Zip Count	ry	try 8. This corporation has liability for intangible tax under s. 199,032, Florida Statutes 1
	9. Name and Address of Current	Regi	Istered Agent		10. Name and Address of New Registered Agent
	KIRBY, GARLAND		8	1	Name
1380 W BAYA AVE LAKE CITY FL 32025			8	2	Street Address (P.O. Box Number is Not Acceptable)
			8	3	3
					Gily FL 85 Zip Code
11	Pursuant to the provisions of Sections 607.0502 office or registered agont, or both, in the State of second the obligation of the second the obligation.	FIOR	irida. Such change was authorized :	oy.	ove-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered

office or r agent. I a	egistered agent, or both, in the State of Florida Such change was a mifamiliar with, and accept the obligations of, Section 607.0505, Flo	uthorized by the corrida Statutes.	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE			
12.	Signature, typed or printed name of registered agent and title if applicable (NOTE OFFICERS AND DIRECTORS	Fit gistered Agent signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TALE	PD DELFIE	1.1 1111.	Change Addition
NAME	KIRBY, GARLAND	1.2 NAME	L. Change L. Muunton
STREET ADDRESS	1380 W. BAYA AVE.		
		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	VPD DELETE	1.4 City - \$1 - 7iP	
NAME	** =	2171111	Change Addition
	KIRBY, FLETCHER	2.2 NAME	
STREET ADDRESS	1380 W. BAYA AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE CITY FL	2.4 C(1Y - ST - Z(P	
TITLE	OTTELE	3.1 11111] Change] Addition
NAME		3 2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DELLE IE	4.1 T(1LE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY - ST - ZIF	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS	$_{1}$ ϕ_{1} $_{2}$	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CHY- \$1 - ZIP	
TITLE	OF LETE	6 1 1HLF	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
City, Ct. 7ip		6 4 OITN 61 710	

14. I do 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.

Garland Kirby President