

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L53986 (0)

1. Corporation Name
K. WARNER INDUSTRIES, INC.



Principal Place of Business
C/O CRAIG W. HUBBELL
P O BOX 183
CAPE CORAL FL 33910-7183

Mailing Address
C/O CRAIG W. HUBBELL
P O BOX 183
CAPE CORAL FL 33910-7183

3. Date Incorporated or Qualified 02/27/1990	3a. Date of Last Report 08/01/1995
4. FEI Number 65-0180960	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	

2. Principal Place of Business	2a. Mailing Address
21. 1325-B Del Prado Blvd	26. 1325-B Del Prado Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22. City & State Cape Coral, FL	27. City & State Cape Coral, FL
23. Zip 33990	28. Zip 33990
Country Lee	Country Lee

9. Name and Address of Current Registered Agent
HUBBELL, VICKI K
4244 SE 20TH PL #317
CAPE CORAL FL 33904

81. Name Vicki K. Hubbell
82. Street Address (P.O. Box Number is Not Acceptable) 1325-B Del Prado Blvd.
83. City Cape Coral
84. State FL
85. Zip Code 33990

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: Vicki K. Hubbell, Vicki K. Hubbell, Pres. DATE: 4/30/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1. TITLE	☐ Change ☐ Addition
NAME	HUBBELL, VICKI K.	2. NAME	
STREET ADDRESS	4244 SE 20TH PL #317	3. STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	4. CITY-ST-ZIP	
TITLE		5. TITLE	☐ Change ☒ Addition
NAME		6. NAME	
STREET ADDRESS		7. STREET ADDRESS	
CITY-ST-ZIP		8. CITY-ST-ZIP	
TITLE		9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY-ST-ZIP		12. CITY-ST-ZIP	
TITLE		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY-ST-ZIP		16. CITY-ST-ZIP	
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY-ST-ZIP		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 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: Vicki K. Hubbell, Vicki K. Hubbell, Pres. DATE: 4/30/96 DAYTIME PHONE: (941) 574-7216

CR2E034 (12/95)