

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90039 028 ***150.00

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DOCUMENT # M25744

1. Entity Name
K.F.W., INC.

Principal Place of Business
**255 HIBISCUS AVE.
LAUDERDALE BY THE SEA FL 33308**

Mailing Address
**255 HIBISCUS AVE.
LAUDERDALE BY THE SEA FL 33308
US**

2. Principal Place of Business

3. Mailing Address
2492 Monterey Pines Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Bend OR

4. FEI Number
59-2630561

Applied For
Not Applicable

Zip

Country

Zip
97701

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WASKOM, KENNETH
255 HIBISCUS AVE.
LAUDERDALE BY THE SEA FL 33308**

Name
Richard BRAMAN
Street Address (P.O. Box Number is Not Acceptable)
6719 NW 50th St
City
TAMARAC FL Zip Code
33321

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **Richard L. Braman ACCOUNTANT**
Signature, typed or printed name of registered agent and title if applicable.

2/24/02
DATE

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
WASKOM, KENNETH
255 HIBISCUS AVE.
LAND BY THE SEA FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2492 Monterey Pines Drive
Bend, OR 97701** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WASKOM, DONNA
255 HIBISCUS AVE.
LAND BY THE SEA FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2492 Monterey Pines Drive
Bend OR 97701** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Richard L. Braman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/2002 541.390.5226
Date Daytime Phone #

CR2E034 (9/01)