FILE NOW: FILING FEE IS \$61.25	FIL	E N	:WO	FILI	NG	FFF	21	\$61	25
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**NONPROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

21

Suite, Apt. #, etc.

City & State

SIGNATURE:

DOCUMENT #

(5)

KIDK INDHICTOR

N, INC.					
Principal Place of Business	Mailing Address				
213 HARRISON STREET TITUSVILLE FL 32780	213 HARRISON STREET TITUSVILLE FL 32780				
2. Principal Place of Business	2a. Mailing Address				

26

27

Suite, Apt. #, etc.

City & State



43096 407-257-0741

3a. Date of Last Report

05/01/1995

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualified

12/13/1991

59-3187284

5. Certificate of Status Desired

4. FEI Number

23	- <u></u>	28				6. Election Campaign Financing		<b>\$</b> 5.	00 May Be
Zip	Country	Zip	T Cou	untry		Trust Fund Contribution			ded to Fees
24 25 29				30		This corporation has liability for interpretation of the statutes	angible ta	x under:	s. 199.032,
	9. Name and Address of Curr	ent Registered Agent		Τ		10. Name and Address of New Reg	Yes []	No	<u>.</u>
				81	Name	10: The state Address of Hew HeB	istered .	Agent	
Kirk, R	r.W.			82					
213 HA	213 HARRISON STREET				Street Add	iress (P.O. Box Number is Not Acceptable)			
	ILLE FL 32780			83					
				84	City			85 2	2ip Code
11. Pursuant	to the provisions of Sections 617,050	)2 and 617 1508. Florido Stol	uton the et-				FL		•
or register tamiliar wi	red agent, or both, in the State of Flo ith, and accept the obligations of, Sec	rida. Such change was autho	rized by the c	ve-n ærpc	amed corpor bration's boar	ration submits this statement for the purpor and of directors. I hereby accept the appoint	se of cha	nging its	registered offic
	in, and accept the obligations or, Sec	otion 617.0503, Florida Statut	tes.	ĺ		and an accept the appoint	ment as	egistere	d agent. I am
SIGNATURE	Signature typed or printed name of registered age	of and title if apply-and		<del></del>					
12.		ND DIRECTORS		Agent	signature require	d when renstating)	DATÉ		
TITLE	D	☐ DELETE	13.			ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	ORS IN 12
NAME	KIRK, R.W.							] Change	☐ Addition
STREET ADDRESS	213 HARRISON STREET		1.2 NA						
CITY-ST-ZIP	TITUSVILLE FL		- 4		DDRESS				
TITLE	D	DELETE	1.4 CH		- ZIP				
NAME	KIRK, J.D.		2.1 717					Change	☐ Addition
STREET ADDRESS	213 HARRISON STREET		2 2 <b>N</b> AI	_	ľ				
CITY-ST-ZIP	TITUSVILLE FL		2 3 STF	REET A	DDRESS				
TITLE	D	DELETE	2 4 01		- ZIP				
NAME	Kirk, R.W., Jr.	[] NETE IE	3.1 TITU	-	İ			] Спалде	Addition
STREET ADORESS	213 HARRISON STREET		. 32 NAM	ΛE					
CITY-ST-ZIP	TITUSVILLE FL		3.3 S1R	EET A	DORESS				
TITLE	THOOVILLE I'E	f Top sto	3 4. CIT		- ZiP				
NAME		DELETE	4 1 TiTt	E	ľ	-		Change .	☐ Addition
STREET ADDRESS			4. 2 NA	ME	İ				
CITY-ST-ZIP			4.3 STR	EET AC	DORESS				
TITLE			4.4 CHTY		ZIP				
NAME		DELETE	5.1 TiTL	Ε				Change	Addition
STREET ADDRESS			5.2 NAM	ΙE				•	_ ,
CITY-ST-ZIP			53STRE	ET AD	ODRESS				
DITLE			5.4 City	- 51-	ZIP				
NAME		DELETE	61 TITL	•				Change	Addition
· · · · · · · · · · · · · · · · · · ·			6.2 NAM	E				•	
STREET ADDRESS			63 STRE	ET AD	ORESS				
City-St-ZiP	cartify that the information		6.4 CiTY	- S1 - Z	nP				
certify that t	the information indicated on this annu	with this filing is voluntarily furn	nished and do	es n	ot qualify for	the exemption stated in Section 119.07(3) and that my signature shall have the same report as required by Chapter \$17. Faints	(k), Florid	a Statute	as I further
oath; that I.	am an officer or director of the corpo	ration or the receiver or truste	e empowered	to e	and accurate execute this	and that my signature shall have the same	legal off	ect as if	made under