

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 19, 2003 8:00 am**  
**Secretary of State**

04-28-2003 90297 028 \*\*\*150.00

**DOCUMENT # P01000098538**



1. Entity Name  
**K.R.S., INC.**

Principal Place of Business  
**585 LAKELAND AVE  
NAPLES FL 34110**

Mailing Address  
**585 LAKELAND AVE  
NAPLES FL 34110**

**55041737**



2. Principal Place of Business  
**28601 N. Diesel Dr**  
Suite, Apt. #, etc.

3. Mailing Address  
**same**  
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State  
**Bonita Springs FL**  
Zip  
**34135** Country  
**USA**

City & State  
**FL**  
Zip  
Country

4. FEI Number **75-3009027** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRANCHINO, THOMAS W  
1250 N TAMiami TRAIL, STE 108  
NAPLES FL 34102**

Name **Steven Stresen-Reuter**  
Street Address (P.O. Box Number is Not Acceptable)

**28601 N Diesel Drive  
Bonita Springs FL Zip Code 34135**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*[Signature]*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**4/7/03**  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D STRESSEN-REUTER, STEVEN  
585 LAKELAND AVE  
NAPLES FL 34110** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D JOHNS, RANDY  
4260 15 AVE, SE  
NAPLES FL 34117** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Stresen-Reuter, Steven ☒ Change ☐ Addition  
28601 N. Diesel Drive  
Bonita Springs, FL 34135 President**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Blanco, Chanel ☐ Change ☒ Addition  
28601 N. Diesel Drive Vice  
Bonita Springs, FL 34135 President**

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/7/03 239-948-3630**  
Date Daytime Phone #

CR2E034 (10/02)