

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P33446** (6)

1. Corporation Name
KINSEL INDUSTRIES, INC.

Principal Place of Business
**8121 BROADWAY, SUITE 300
HOUSTON TX 77061**

Mailing Address
**8121 BROADWAY, SUITE 300
HOUSTON TX 77061-1340**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/02/1991		3a. Date of Last Report 03/14/1996	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 76-0010791		Applied For <input type="checkbox"/> Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country		29. Country		30. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent			
81. Name				82. Street Address (P.O. Box Number is Not Acceptable)			
83. City				84. Zip Code			
				FL			

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PD	KINSEL, RICHARD L., JR.	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
470 FOX RUN	LEAGUE CITY TX	2.1 TITLE	2.2 NAME
VP	CROXTON, RICHARD	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
12138 ELLA LEE LN	HOUSTON TX	3.1 TITLE	3.2 NAME
TS	FULLER, RICHARD	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
2711 ARROWHEAD DR	SUGAR LAND TX	4.1 TITLE	4.2 NAME
401 Lakeside Ln, #201B	Nassau Bay, Tx 77058	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
1819 High Gate Ct.	Sugar Land, Tx 77478	5.1 TITLE	5.2 NAME
5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	6.1 TITLE	6.2 NAME
6.3 STREET ADDRESS	6.4 CITY-ST-ZIP		

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.

SIGNATURE:  **2/12/97** **713-641-5111**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)