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FILED
Feb 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P92000004364 (5)

1. Corporation Name

KEPASE DEVELOPMENT COMPANY, INC.



Principal Place of Business

12298 MATTERHORN DRIVE
AIRPORT WOODS INDUSTRIAL PARK
FT. MYERS FL 33902

Mailing Address

12298 MATTERHORN DRIVE
AIRPORT WOODS INDUSTRIAL PARK
FT. MYERS FL 33902

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
11/13/1992

3a. Date of Last Report
03/15/1996

4. FEI Number

65-0379274

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

9. Name and Address of Current Registered Agent

GARRITY, PAUL G SR.
12298 MATTERHORN DR.
AIRPORT WOODS INDUSTRIAL PARK
FT. MYERS FL 33902

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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:

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	NAME	GARRITY JR., PAUL G.	STREET ADDRESS	36 TEMPLE COURT	CITY-ST-ZIP	NEW HAVEN CT 06510
TITLE	VD	NAME	GARRITY SR., PAUL G.	STREET ADDRESS	3399 GULF SHORE BLVD.	CITY-ST-ZIP	NAPLES FL 33940
TITLE	TD	NAME	GARRITY, SEAN R.	STREET ADDRESS	3 CLOVER LANE	CITY-ST-ZIP	MADISON CT 06443
TITLE	SD	NAME	GARRITY, KEVIN S.	STREET ADDRESS	72 WICKFORD PLACE	CITY-ST-ZIP	MADISON CT 06443
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP	
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	1.2 NAME	GARRITY JR., PAUL G	1.3 STREET ADDRESS	10 SPINNAKER LANE	1.4 CITY-ST-ZIP	ESSEX CT 06443
2.1 TITLE		2.2 NAME		2.3 STREET ADDRESS		2.4 CITY-ST-ZIP	
3.1 TITLE	TD	3.2 NAME	SEAN R GARRITY	3.3 STREET ADDRESS	40 NEPTUNE DRIVE	3.4 CITY-ST-ZIP	MADISON CT 06443
4.1 TITLE		4.2 NAME		4.3 STREET ADDRESS		4.4 CITY-ST-ZIP	
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:

SIGNATURE REQUIRED

Date

Daytime Phone #

0624510

CR2E034 (9/96)