

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # P92000014575 (4)

95 FEB 28 PM 3:46

1. Corporation Name
KYNO, INC.

Principal Place of Business
**1477 MARKET ST
TALLAHASSEE FL 32312**

Mailing Address
**P.O. BOX 13061
TALLAHASSEE FL 32317**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **12/29/1992** 3a. Date of Last Report **10/12/1994**

4. FEI Number **59-3155807** 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

2. Principal Place of Business

2a. Mailing Address

21 Suits, Apt. #, etc.

26 Suits, Apt. #, etc.

23 City & State

28 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KYNO, STEPHEN J
1477 MARKET ST
TALLAHASSEE FL 32312**

81 Name **KYNO, STEPHEN J.**
82 Street Address (P.O. Box Number is Not Acceptable) **9053 EAGLES RIDGE DRIVE**
83 **-**
84 City **Tallahassee** FL 85 Zip Code **32312**

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 607.0905, Florida Statutes.

SIGNATURE **STEPHEN J. KYNO**
Signature, typed or printed name of registered agent and title if applicable

Signature
STEPHEN J. KYNO
(NOTE: Registered Agent signature required when reconstituting)

1/13/95
DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PVTS	KYNO, STEPHEN	1477 MARKET STREET	TALLAHASSEE FL 32312
D	KYNO, STEPHEN	1477 MARKET STREET	TALLAHASSEE FL 32312

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		9053 EAGLES RIDGE DRIVE	
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		9053 EAGLES RIDGE DRIVE	
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 as an attachment with an address.

SIGNATURE: *Signature* **STEPHEN J. KYNO**
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

1/19/95 **819-2183**
Date Filing #