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FILED
May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000017859 (8)

1. Corporation Name

K C FARM & RANCH SERVICES, INC.



Principal Place of Business

Mailing Address

898 CYPRESS LAKE VIEW CT
TARPON SPRINGS FL 34689
US

898 CYPRESS LAKE VIEW CT
DUNEDIN FL 34689
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/08/1993

4. FEI Number

59-3176560

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 6059 White Road

26 6059 White Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Brooksville, FL 34602

28 Brooksville, Florida

Zip

Zip

Country

Country

24 34602 25 US

29 34602 30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CASEY, JEFFREY G
898 CYPRESS LAKEVIEW CT
TARPON SPRINGS FL 34689

81 Name Casey, Jeffrey G.

82 Street Address (P.O. Box Number is Not Acceptable)
6059 White Road

83

84 City Brooksville

FL

85 Zip Code 34602

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

Jeffrey G Casey

Jeffrey G Casey

4-26-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME CASEY, JEFFREY G
STREET ADDRESS 898 CYPRESS LAKE VIEW CT
CITY-ST-ZIP TARPON SPRINGS FL ☐ DELETE

1.1 TITLE D
1.2 NAME Casey, Jeffrey G
1.3 STREET ADDRESS 6059 White Rd
1.4 CITY-ST-ZIP Brooksville, Florida 34602 ☒ Change ☐ Addition

TITLE D
NAME CASEY, DEBRAH A.
STREET ADDRESS 898 CYPRESS LAKE VIEW CT
CITY-ST-ZIP TARPON SPRINGS FL ☐ DELETE

2.1 TITLE D
2.2 NAME Casey, Debrah A.
2.3 STREET ADDRESS 6059 White Road
2.4 CITY-ST-ZIP Brooksville, Florida 34602 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 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:

Jeffrey G Casey

Jeffrey G Casey

4-26-98

352-544-6270

CR2E034 (10/97)