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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

President

SIGNATURE: X

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000021829 (5)

K & G BUILDERS OF NORTH FLORIDA INC.

4206 HOLLY COURT C/O DAVID A. KING. ATTY. 1416 KINGSLEY AVENUE MIDDLEBURG FL 32068 ORANGE PARK FL 32073-4509 3. Date Incorporated or Qualified 3a. Date of Last Report 03/24/1993 03/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3175918 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 intengible tax under s. 199.032 210 Country Zip Country 8. This corporation has liability 30 Yes ☐ No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KING, DAVID A ATTORNEY AT LAW **B2** Street Address (P.O. Box Number is Not Acceptable) 1416 KINGSLEY AVENUE 83 **ORANGE PARK FL 32073** City 84 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 Stgratus, typed or print dican is of registered agent and title Lapphoable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. DELETE Change Addition TITLE 1.1 TITLE BURRIS, KENNETH L 1.2 NAME CR2E034 NAME **4206 HOLLY COURT** 1.3 STREET ADDRESS STREET ADDRESS MIDDLEBURG FL CI1Y - \$1-7IP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE BURRIS, GAIL D 2.2 NAME NAME 4206 HOLLY COURT 2.3 STREET ADDRESS STREET ADDRESS MIDDLEBURG FL 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELETE 3.1 TITLE Change Addition THE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 DITY-ST-ZIP CITY-ST-Addition Change TITEE DELETE 41 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP **CITY 51-7**( DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition 6.1 TITLE THTLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY ST-ZIP 6.4 CITY - ST-ZIP 14. I do nereby 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

FILED Jan 31 1997 8:00am Secretary of State



Daytime Phone #

0015424