

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

FILED

Apr 15 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 # P93000033013 (2)

1. Corporation Name
CKW & ASSOCIATES, INC.

Principal Place of Business
898 BUTTONWOOD DR.
UNIT 202
FORT MYERS BEACH FL 33931

Mailing Address
898 BUTTONWOOD DR.
UNIT 202
FORT MYERS BEACH FL 33931-2236

3. Date Incorporated or Qualified
05/06/1993

3a. Date of Last Report
04/26/1996

2. Principal Place of Business

2a. Mailing Address

21 203 46th Ave. Terrace West

26 203 46th Ave. Terrace West

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Unit 435

27 Unit 435

City & State

City & State

23 Bradenton FL

28 Bradenton FL

Zip Country

Zip Country

24 34207

29 34207

30

4. FEI Number

65-0413408

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

10. Name and Address of New Registered Agent

WILLIAMS, CHARLES A
898 BUTTONWOOD DR.
UNIT 202
FORT MYERS BEACH FL 33931

81 Name

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

203 46th Ave. Terrace West

83

Unit 435

84 City

Bradenton

FL

85 Zip Code

34207

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WILLIAMS, CHARLES A
898 BUTTONWOOD DR., UNIT 202
FORT MYERS BEACH FL 33931

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
203 46th Ave. Terrace West
Bradenton FL 34207

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WILLIAMS, KAY H
898 BUTTONWOOD DR., UNIT 202
FORT MYERS BEACH FL 33931

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
203 46th Ave. Terrace West
Bradenton FL 34207

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
7000021444
-04/16/97--01005--027
***165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 of this report on an attached page an address.

SIGNATURE: Charles A. Williams President

April 8, 1997

CR2E034 (9/96)