

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000050291 (2)**

1. Corporation Name

KENDON INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

~~8507-SW-5TH PLACE
GAINESVILLE FL 32607~~
22415 SW 15th Ave
Newberry, FL 32669

~~8507-SW-5TH PLACE
GAINESVILLE FL 32607~~
22415 SW 15th Ave
Newberry, FL 32669

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 07/13/1993	3a. Date of Last Report 02/23/1994
4. FEI Number 59-3193248	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 193.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 22415 SW 15th Ave	2a. Mailing Address 26 22415 SW 15th Ave
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Newberry, FL	City & State 28 Newberry, FL
Zip 24 32669	Country 25 Alachua
Zip 29 32669	Country 30 Alachua

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRICE, DONALD R
~~8507-SW-5TH PLACE~~
GAINESVILLE FL 32607
22415 SW 15th Ave
Newberry, FL 32669

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the 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

Donald R Price

(NOTE: Registered Agent signature required when resigning)

DATE

4/26/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	PRICE, DONALD R
STREET ADDRESS	8507-SW-5TH PLACE 22415 SW 15th Ave
CITY-ST-ZIP	GAINESVILLE FL 32607 Newberry, FL 32669
TITLE	D
NAME	FINGER, KENNETH F <i>Deceased</i>
STREET ADDRESS	1815 NW 31ST TERR
CITY-ST-ZIP	GAINESVILLE FL 32605
TITLE	D
NAME	CALFEE DENNIS A
STREET ADDRESS	10001 SW 15TH PL
CITY-ST-ZIP	GAINESVILLE FL 32607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11 TITLE	<i>Chief Executive Officer</i>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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 119.07(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 the 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:

Donald R Price

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95

Date

904-342-9328

Telephone Number