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

PROFIT

FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 35 NOTO NO FOR CORPORATIONS 19964-1396 P93000087198 (6) DOCUMENT # 1. Corporation Name KRR REALTY, INC. Mailing Address Principal Place of Business 3450 W. BUSCH BOULEVARD 3450 W. BUSCH BOULEVARD SUITE 195 SUITE 195 **TAMPA FL 33618 TAMPA FL 33618** 3. Date Incorporated or Qualified 3a. Date of Last Report 03/03/1995 12/17/1993 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-3218849 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Added to Fees **1rust Fund Contribution** 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zip Country Zιο Florida Statutes Yes No 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Street Address (P.C. Box Number is Not Acceptable) 82 NESBITT, STEVEN M 3450 W. BUSCH BOULEVARD 83 SUITE 195 Zip Code 85 **TAMPA FL 33618** 84 City 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. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition ☐ Change DELETE 1.1 TITLE TITLE 1.2 NAME VALENTI, DARRELL J NAME 1.3 STREET ADDRESS 3450 W. BUSCH BLVD., SUITE 195 STREET ADDRESS 1.4 City-St-ZiP **TAMPA FL 33618** CITY-S1-2IP Addition ☐ Change TT DELETE 2 1 THILE TITLE 2.2 NAME NESBITT, STEVEN M NAME 2.3 STREET ADDRESS 3450 W BUSCH BLVD STE 195 STREET ADDRESS 24 CHTY - ST - ZIP TAMPA FL CITY - S1 - ZIP Change Addition DELETE 3. 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 4. 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST-ZIP Change ☐ Addition □ DELETE 5 1 1HLE TITLE 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CHTY-ST-ZIP Change Addition DELETE 6.1 TITLE TULE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 6.4 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 certify that I am an officer or director of the corporation of 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 SIGNATURE: Da: time Prione #