

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandria B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000006061 (3)

1. Corporation Name

KEMPf ENTERPRISES, INC.



Principal Place of Business

2954 MAYFAIR COURT
CLEARWATER FL 34621
US

Mailing Address

2954 MAYFAIR COURT
CLEARWATER FL 34621
US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. State, Apt. #, etc.	26. State, Apt. #, etc.	01/18/1994	04/27/1995
22. City & State	27. City & State	4. FEI Number	Applied For
23. Zip	28. Zip	59-3218939	Not Applicable
24. Country	29. Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25. Country	30. Country	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

KEMPf, HENRY A. J
2954 MAYFAIR COURT
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
2. NAME	KEMPf, HENRY A. J	2. NAME	
3. STREET ADDRESS	2954 MAYFAIR COURT	3. STREET ADDRESS	
4. CITY, ST, ZIP	CLEARWATER FL	4. CITY, ST, ZIP	
5. TITLE	VTSO	5.1 TITLE	☐ Change ☐ Addition
6. NAME	KEMPf, MARIE-LOUISE	6. NAME	
7. STREET ADDRESS	2954 MAYFAIR COURT	7. STREET ADDRESS	
8. CITY, ST, ZIP	CLEARWATER FL	8. CITY, ST, ZIP	
9. TITLE		9.1 TITLE	☐ Change ☐ Addition
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY, ST, ZIP		12. CITY, ST, ZIP	
13. TITLE		13.1 TITLE	☐ Change ☐ Addition
14. NAME		14. NAME	
15. STREET ADDRESS		15. STREET ADDRESS	
16. CITY, ST, ZIP		16. CITY, ST, ZIP	
17. TITLE		17.1 TITLE	☐ Change ☐ Addition
18. NAME		18. NAME	
19. STREET ADDRESS		19. STREET ADDRESS	
20. CITY, ST, ZIP		20. CITY, ST, ZIP	
21. TITLE		21.1 TITLE	☐ Change ☐ Addition
22. NAME		22. NAME	
23. STREET ADDRESS		23. STREET ADDRESS	
24. CITY, ST, ZIP		24. CITY, ST, ZIP	
25. TITLE		25.1 TITLE	☐ Change ☐ Addition
26. NAME		26. NAME	
27. STREET ADDRESS		27. STREET ADDRESS	
28. CITY, ST, ZIP		28. CITY, ST, ZIP	
29. TITLE		29.1 TITLE	☐ Change ☐ Addition
30. NAME		30. NAME	
31. STREET ADDRESS		31. STREET ADDRESS	
32. CITY, ST, ZIP		32. CITY, ST, ZIP	

SHOULD REM: KEMPf

14. I do hereby certify that the information supplied with this form is accurately 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 biennial 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 owner 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 addendum with an address.

SIGNATURE:

SIGNATURE AND SIGNED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HENRY A. KEMPf, Jr.

2/23/96

813-791-4512

CR2E034 (12/95)