

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

FILED  
Apr 19, 1999 8:00 am  
Secretary of State

04-19-1999 90043 006 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000050508

1. Corporation Name  
K & T OF ORLANDO, INC.



Principal Place of Business

2621 S SANFORD AVE  
STE B  
SANFORD FL 32773  
US

Mailing Address

2060 GERONIMO TRAIL  
MAITLAND FL 32751

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/08/1994

4. FEI Number

59-3257268

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 4107 S. ORLANDO DR

2a. Mailing Address

26 4107 S. ORLANDO DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 SANFORD

City & State

28 SANFORD FLA.

Zip

24 32773

Country

25 SEMINOLE

Zip

29 32773

Country

30 SEMINOLE

9. Name and Address of Current Registered Agent

TAYLOR, ERIC C  
2060 GERONIMO TRAIL  
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 Eric TAYLOR P. FOR ADDRESS CHANGE ONLY 4-15-99  
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE  
NAME TAYLOR, ERIC C  
STREET ADDRESS 2060 GERONIMO TR  
CITY-ST-ZIP MAITLAND FL

TITLE VP ☐ DELETE  
NAME KELEHER, THOMAS G  
STREET ADDRESS 341 FERDINAD DR  
CITY-ST-ZIP LONGWOOD FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 1003 S. RIVERSIDE DR.  
1.4 CITY-ST-ZIP EDGEWATER FL 32141

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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

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

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

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eric TAYLOR 4-15-99 407-330-0834  
Signature and typed or printed name of signing officer or director Date Daytime Phone #