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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000055327 (8)

WEIL KIC, INC.

FILED Mar 14 1997 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			7 15411541 115 15111 55111 55111 55111			
8346 S. TAMIAMI TRL. SARASOTA FL 34231 US		2003 WOOD HOLLOW PLACE SARASOTA FL 34235-9143 US						
					 Date Incorporated or Qualified 07/25/1994 	lified 3a. Date of Last Report 04/09/1996		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number			pplied For
21 204	19 Keywolds St	26			65-0507604			t Applicable
Suite, Apt. #, 'etc.' Suite, Apt. #, etc. 27					5. Certificate of Status Desired See Required Fee Required			
City & State City & State					6. Election Campaign Financing \$5.00 May 8 Trust Fund Contribution Added to Fee			
231 SON	Chuntry	28	Countr		Trust Fund Contribution	intanaible tex		
24 34231 25 Sopasoto 20 30				Florida Statutes Yes No				
	9. Name and Address of Current R	egistered Agent		T No	10. Name and Address of New Re	gistered Age	nt.	
	ICKI, THOMAS		81	Name				
2003 WOOD HOLLOW PLACE SARASOTA FL 34235			82	82 Street Address (P.O. Box Number is Not Acceptable)				
OMM	HOUTH FL 01400		83	1			Later from remarks of	
			84	City			35 Zip (Code
44 Durament	to the provisions of Sections 607.06/12 a	nd 607 1508 Florida Stat	utos the abov	vo-named cor	poration submits this statement for the p	FL	anning it	is registered
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida Such change was	s authorized b	y the corpora	ation's board of directors. I hereby accep	ot the appoin	ment as	registered
SIGNATURE	Signature, typed or printed name of regulered ariesil a	ratitle il applicable (NC	OTE Registered As	gent signature requ	ired v4.cn (cinstating)	DATE		
12.	OFFICERS AND L		13.		ADDITIONS/CHANGES TO OFFIC			***************************************
TITLE	P	DELETE	1.1 1111.6				Change	Addition
NAME	WELICKI, TONI E		1.2 NAME					
STREET ADDRESS	2003 WOOD HOLLOW PLACE			LADDRESS				
CITY-ST-ZIP TITLE	SARASOTA FL	DELETE	1.4 C/TY - 2 1 T/TLE	S1 - ZIP			Change	Addition
NAME	WELICKI, THOMAS		2.2 NAME			-		
STREET ADDRESS	2003 WOOD HOLLOW PLACE			T ADDRESS				
CITY-ST-ZIP	SARASOTA FL		2 4 CITY	- ST-ZIP				
TITLE		☐ DELETE	3 1 1011				Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	LADDRESS				
CITY-SY-ZIP			3.4. CITY	- S1 - 7IP			I	
TITLE		☐ DELETE	4.1 TITLE			L_	Change	Addition
NAME			4. 2 NAM					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		D MICTO	4.4 CITY-	ST-ZIP			Change	Addition
TITLE		☐ DELETE	5.1 HILL			L.	, onango	L AUGITOR .
NAME .			5.2 NAME					
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP TITLE		DELFTE	5.4 C(1)Y- 6 1 1/1LF			T	Change	Addition
NAME			G.2 NAME			L		
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP			6.4 CITY					
OTITOTE LIT	L							

I do 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 planged, or on an attachment with an address.

941-923-6459