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

CORPORATION ANNUAL REPORT

1998

ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000075194 (8) KAMWOOD, INCORPORATED

Principal Place of Business Mailing Address 1120 PINELLAS BAYWAY TIERRA VERDE FL 33715

## **FILED** Apr 28 1998 8:00am Secretary of State



1120 PINELLAS BAYWAY TIERRA VERDE FL 33715 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/13/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3272079 Not Applicable Suite, Apl. #. etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 26 Trust Fund Contribution Added to Fees Country Ζiρ Country Zip 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 29 30 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name JACOBSON, RICHARD A 501 EAST KENNEDY BLVD. Street Address (P.O. Box Number is Not Acceptable) **SUITE 1700** TAMPA FL 33602 City 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 Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change Addition KAMLADE, HANS 1.2 NAME NAME 13037 GULF BOULEVARD 1.3 STREET ADDRESS STREET ADDRESS MADEIRA BEACH FL 33708 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE WOOD, PAUL S NAME 2.2 NAME 13037 GULF BOULEVARD STREET ADDRESS 23 STREET ADDRESS MADEIRA BEACH FL 33708 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition 51 THILE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 61 TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby 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 suppliernental 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 previous or trusted any owned 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 allower.

SIGNATURE

HANS KAMLADE

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