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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000089258

KUNKEL CONSTRUCTION, INC.

## FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90009 001 \*\*\*150.00



Principal Place of Business Mailing Address 9225 EAST HAMLIN ROAD 9225 EAST HAMLIN ROAD FT. MYERS FL 33912 FT. MYERS FL 33912 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 2. Principal Place of Business 12/08/1994 2a. Mailing Address 4. FEI Number 21 26 Applied For Suite, Apt. #, etc. 65-0533753 Suite, Apt. #, etc. Not Applicable 22 5. Certifcate of Status Desired \$8.75 Additional City & State Fee Required City & State 23 6. Election Campaign Financing \$5.00 May Be 28 Zip Trust Fund Contribution Country Added to Fees Country 24 8. This corporation owes the current year Intangible 25 29 9. Name and Address of Current Registered Agent 30 Personal Property Tax. Yes □No 10. Name and Address of New Registered Agent KUNKEL, RICKY J 81 Name 9225 EAST HAMLIN ROAD Street Address (P.O. Box Number is Not Acceptable) 82 FT. MYERS FL 33912 83 **对于湖底温度** 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 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required 12. hen reinstating) OFFICERS AND DIRECTORS CATE 13. TITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE CR2E034 (11/98) 11 TITLE NAME KUNKEL, RICKY J ☐ Addition 1.2 NAME 9225 EAST HAMLIN ROAD STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP FT. MYERS FL 33912 TITLE 1.4 CITY-ST-ZIP ☐ DELETE 2.1 TITLE KETCHUM, LENNY NAME Change ☐ Addition 22 NAME STREET ADDRESS 1605 DOGWOOD FORT 2.3 STREET ADDRESS FT. MYERS FL:33912, CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE NAME ☐ Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME ∴ Change ( & ) Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE NAME ☐ Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

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 Block 12 or Block 13 if changed, of on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

☐ DELETE

J. Co. 33

Addition

☐ Change