## FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

Block 12 or Block 13 if changed, or en an attachment with

Jan 16 1998 8:00am **PROFIT** OF STATE FLORIDA DEPARTMEN CORPORATION Sandra B. Mor ANNUAL REPORT Secretary of State Secretary of St TIONS DIVISION OF CORPO 1998 P9500000568 (2) **DOCUMENT #** KPS, INC. Principal Place of Business Mailing Address 2304 W MAIN STREET 2304 W MAIN STREET LEESBURG FL 34748 LEESBURG FL 34748 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/03/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 2304 39-4249871 21 \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible Yes ☐ No Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SENTNER, KEVIN A 1000 W MAIN STREET LEESBURG FL 34748 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the by the corporation's board of directors. I horeby accept the appointment as registered office or registered agent, or both, in the State of Florida Such change was authorize agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida State SIGNATURE (NOTE Register Signature, typed or printed name of registered agent and titre if applicable ent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition DELETE TITLE D NAME PILGER, KEITH A. 1.2 N N15206 23 AVE. T ADDRESS STREET ADDRESS 135 NEKOOSA WI 54457 \$1-2IP CITY-ST-ZIP 1.40 Change DELETE Addition TITLE 21 ASHENBRENER, PAMELA 2.2 N NAME 6320 CURVE ST. 1 ADDRESS STREET ADDRESS 2.3 S WIS. RAPIDS WI 54494 DITY-ST-ZIP ST-ZIP DELETE Change Addition TITLE 3.1 T PILGER, SCOTT A. NAME 32 N/ 11784 79 AVE N. I ADDRESS STREET ADDRESS 3.3 ST SEMINOLE FL 34642 CITY-ST-ZIP 3.4. C Addition DELETE Change 4.1 11 TITLE PILGER, FRANK 4.2 N NAME 2304-A-W MAIN ST. T ADDRESS STREET ADDRESS 4.3 ST LEESBURG FL 34748 ST-ZIP CITY-ST-ZIP 4.4 DIT DELETÉ Change Addition 5.1 TIT TITLE NAME 5.2 NA ADDRESS STREET ADDRESS 5.3 \$1 CITY-ST-ZIP 5 4 C/1 Change Addition DELETE 6.1 1/1 TITLE NAME 6.2 NA 6.3 ST STREET ADDRESS CITY-ST-ZIP ion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information It my signature shall have the same legal effect as if made under oath; that I am an eport as required by Chapter 607, Florida Statutes; and that my name appears in 14. Thereby certify that the information supplied with this filing does not qualify for the exeindicated on this annual report or supplemental appeal report is true and accurate an officer or director of the corporation or the record or or trustee empowered to execute the corporation.

FILED