FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

| DOCUMENT # 1. Corporation Name | P95000011314 | (8) |
|---------------------------------|--------------|-----|
|---------------------------------|--------------|-----|

KEN-MACK OF AMERICA INC.



| Principal Place of Business | Principal Place of Business Mailing Address | | | I FRONTOON THE NOTE OF CONTROL OF THE PROPER PROPER TO THE TOTAL PROPERTY OF THE PROPERTY | | | |
|--|--|---------------------------------|---------------------------------------|--|--------------------------|-----------|--|
| 5692 ORCHARD WAY WEST PALM BEACH FL 33417 | 5692 ORCHARD WAY WEST PALM BEACH FL 33417 | | | | | | |
| | <u> </u> | | | 3. Date Incorporated or Qualified 02/08/1995 | 3a. Date of Last Rep | oort | |
| Principal Place of Business 2a. Mailing Address | | | 4. FET Number | Ap | plied For | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. | | | · | V No | ot Applicable | | |
| 22 Lot 6 | Suite, Apt. #, etc. [27] Lot-6 | | | 5. Certificate of Status Desired | \$8.75 A | | |
| Crty & State | City & State | City & State | | 6. Election Campaign Financing | \$5.00 | May Re | |
| 23 W, P, B, Fla | | 7-LA | | Trust Fund Contribution | Added t | o Fees | |
| 24 33417 25 Paly Beach | Ziρ 29 33Υ/ ") | Country | | 8. This corporation has liability for in | | 99.032, | |
| 9. Name and Address of Current I | | 30 Palm Bo | HICK | Florida Statutes Yes 10 Name and Address of New Pt | No | | |
| | 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name | | | | | | |
| \widehat{F} church, Kenneth R | ch trinneth | R. | | | | | |
| OE Glicci Address | | | s (P.O. Box Number is Not Acceptable) | 9) 7 | | | |
| WEST PAIM REACH FL 32417 | | | | | <i>c</i> | | |
| (a),t, | | P, B | | | | | |
| | | 84 City | EO. | | 85 Zp C | | |
| 11. Pursuant to the provisions of Sections 607.0502 at | nd 607.1508, Florida Statul | tes, the above-named of | corporation | on submits this statement for the pure | | 3417 | |
| or registered agent, or both, in the State of Florida, familiar with, and accept the obligations of, Section | | | s board o | of directors. Thereby accept the appo | intment as registered ac | gent. Lam | |
| SIGNATURE | | J. | | | | | |
| Signature, typed or prairio haine of registerior apinin, and | to entrapy Lable (No | OTE: Registered Agent signature | re integral | To Telestating | DATE | | |
| 12. OFFICERS AND [| | 13. | | ADDITIONS/CHANGES TO OFF | DERS AND DIRECTORS | S IN 12 | |
| THUE P | ☐ DELETE | 1. 1 TITLE | P | | Change [| Addition | |
| NAME CHURCH, KENNETH R | | 1.2 NAME | | urch Kenneth | | | |
| STREET ADDRESS 5692 ORCHARD WAY | | L3 STREET ADDRESS | 153 | SI DREXEL Rd. C | 1+6 | | |
| CITY-ST-ZIP WEST PALM BEACH FL 33417 | | 1.4 C/TY - S1 - Z/P | w | P.B. +LA 334 | 17 | į | |
| TILE V | CO DELETE | מוויד ב-2 ב | V | | | Addition | |
| NAME SCULTHORPE, RONALD | | 2.2 NAME | | ilthorpe Rounld | | | |
| STREET ADDRESS 1567 61 TRAIL SOUTH | | 2.3 STREET ADDRESS | | DREKEL Rd Lote | | | |
| CITY-ST-ZIP WEST PALM BEACH FL 33415 | | 2.4.0(1)Y+\$1+Z(P | L3_1 | P.B. 7LA 3341 | 7 | | |
| ST SOURCE OF ST | ☐ DELETE | 3 1 TITLE | İ | | Cnange [| Addition | |
| NAME ECKHOFF, SUSAN | | 3.2 NAME | ~ | DME | | | |
| SIRELT ADDRESS 464 PENSACOLA DR | | 3.3 STREET ADDRESS | 7 | JWC | | | |
| CHY-ST-ZIP LANTANA FL 33462 | F7 ne- crc | 3.4 CITY - \$1 - 7(P) | ļ | | | <u></u> | |
| NAME | DE: ETE | 4 1 11TLE | | | ☐ Change [| Addition | |
| | | 4.2 NAME | - | A STATE OF THE STA | | | |
| STREET ADDRESS | | 4 3 STREET ADDRESS | • | | | | |
| CRY-ST-ZIP TITLE | C) DELET: | 4.4 C(1) Y - ST Z(F | ļ | | | | |
| NAME | DELETÉ | 5 1 THUE | | | Change [| Addition | |
| STREET ADDRESS | | 5.2 NAME | | | | | |
| STREET AJURESS CITY - S7 - ZIP | | 5 3 STREET ACORESS | | | | | |
| THE | DELETE | 5.4 CITY - ST - 7IP | | | | | |
| NAME | F) percu | 6 1 TICLE | | | Change [| Addition | |
| • | | 6.2 NAME | | | | | |
| STHEET ADDRESS | | 6.3 STREET ADDRESS | | | | 1 | |
| City ST-ZIF 14. I do hereby certify that the information supplied with | this filtron is voluntarily five | £ 4 CITY - S1 - ZIP | like for " | no recognition statut to 0 - 6 - 6 - 6 - 6 - 6 | 70.01 | | |

certify that the information indicated on this arinual 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 B

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: SIGNATURE AND TYPED OR PRI

1/16/96 407-689-3826