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Mar 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000011375 (9)

1. Corporation Name:

KERNOW CORPORATION, INC.



Principal Place of Business:

156 ROLLING DUNES DR.
SANTA ROSA BEACH FL 32549

Mailing Address:

156 ROLLING DUNES DR.
SANTA ROSA BEACH FL 32459-5146

3. Date Incorporated or Qualified 02/08/1995	3a. Date of Last Report 04/10/1996
4. FEI Number 59-3295647	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business:

21. State, Apt. #, etc.

22. City & State:

23. Zip:

Country:

2b. Mailing Address:

26. State, Apt. #, etc.

27. City & State:

28. Zip:

Country:

9. Name and Address of Current Registered Agent

PARKS, JACQUELINE M
308 RUSKIN PLACE
SEASIDE FL 32549

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. 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 officer or registered agent to be 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:

Jacqueline M. Parks

(NOTE: Registered Agent signature required when reinstating)

DATE

16th March 1997

12. OFFICERS AND DIRECTORS

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P
BAKEWELL, ANTHONY
156 ROLLING DUNES DR.
SANTA ROSA BEACH FL 32459
V
PARKS, JACQUELINE M
156 ROLLING DUNES DR.
SANTA ROSA BEACH FL 32459

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
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5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
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6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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14. 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, or on an attachment with an address.

SIGNATURE:

Jacqueline M. Parks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16th March 1997

904-231-1527

0055430

CR2E034 (9/96)