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Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000043382 (7)**

1. Corporation Name

KLUBKIDS REALTY CORP.

Principal Place of Business

**4501 N. TAMiami TRAIL #300
NAPLES FL 33940**

Mailing Address

**4501 N. TAMiami TRAIL #300
NAPLES FL 33940**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/06/1995

4. FEI Number

58-2181815

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23

28

Zip

34103

Country

Collier

Zip

34103

Country

Collier

9. Name and Address of Current Registered Agent

**HANS, TIMOTHY G
4501 N. TAMiami TRAIL, #300
NAPLES FL 33940 34103**

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 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	KLUBERDANZ, WALLACE	1.2 NAME	Kluberdanz, Wallace J.
STREET ADDRESS	2373 BROADWAY, APT. 1033	1.3 STREET ADDRESS	c/o 4501 N. Tamiami Trail, #300
CITY-ST-ZIP	NEW YORK NY 10024	1.4 CITY-ST-ZIP	Naples, FL 34103
TITLE	S	2.1 TITLE	S
NAME	KLUBERDANZ, WALLACE	2.2 NAME	Kluberdanz, Wallace J.
STREET ADDRESS	2373 BROADWAY, APT. 1033	2.3 STREET ADDRESS	c/o 4501 N. Tamiami Trail, #300
CITY-ST-ZIP	NEW YORK NY 10024	2.4 CITY-ST-ZIP	Naples, FL 34103
TITLE	T	3.1 TITLE	T
NAME	KLUBERDANZ, WALLACE	3.2 NAME	Kluberdanz, Wallace J.
STREET ADDRESS	2373 BROADWAY, APT. 1033	3.3 STREET ADDRESS	c/o 4501 N. Tamiami Trail, #300
CITY-ST-ZIP	NEW YORK NY 10024	3.4 CITY-ST-ZIP	Naples, FL 34013
TITLE		4.1 TITLE	VP
NAME		4.2 NAME	Drew N. Attanasio
STREET ADDRESS		4.3 STREET ADDRESS	85 Caribbean Road
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Naples, FL 34108
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 officer or director of the corporation or the registered agent 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 if changed, or on an affidavit with an address.

SIGNATURE:

Wallace J. Kluberdanz, President

2/18/98

941-434-4925

CP2E034 (10/97)