

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

PROFIT
CORPORATION
ANNUAL REPORT

1999 2000



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 07, 2000 8:00 am
Secretary of State

07-07-2000 90406 049 ***150.00

DOCUMENT # P95000062951

Corporation Name
KATIE HOUSE INC.

Principal Place of Business

WILKINSON ROAD
SARASOTA FL 34231

Mailing Address

2705 WILKINSON ROAD
SARASOTA FL 34231

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/14/1995

4. FEI Number

65-0601195

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 the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

BALOG, KATALIN
2705 WILKINSON ROAD
SARASOTA FL 34231

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

I, 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 fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2. OFFICERS AND DIRECTORS

FILE P ☐ DELETE

NAME BALOG, KATALIN
STREET ADDRESS 2705 WILKINSON RD.
CITY-STATE-ZIP SARASOTA FL 34231

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

FILE ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Phone #