

P95000065651

FILED
Jul 24, 2000 8:00 am
Secretary of State

07-24-2000 90007 036 ***150.00

Entity Name
KILLEARN ANTIQUES, INC.

Principal Place of Business
**15 TIMBERLANE RD
 TALLAHASSEE FL 32312**

Mailing Address
**1415 TIMBERLANE RD
 TALLAHASSEE FL 32312-1735**

2. Principal Place of Business		3. Mailing Address		4. FFI Number 59-3368642	Applied For ☐ Not Applicable ☐
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
JANECEK, ANITA M 3620 CHERRY BLUFF LANE TALLAHASSEE FL 32312		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (Signature, Typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when registered.)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALMARODE, RICHARD 1415 TIMBERLANE RD TALLAHASSEE FL 32312 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HAGERTY, ANN 1415 TIMBERLANE RD TALLAHASSEE FL 32312 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JANECEK, ANITA 1415 TIMBERLANE RD TALLAHASSEE FL 32312 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S IVORY, EVE E 1415 TIMBERLANE RD TALLAHASSEE FL 32312 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SGTA STRAZULLA, MARCIA 1415 TIMBERLANE RD TALLAHASSEE FL 32312 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowerment.

SIGNATURE: Richard L. Almarode 3/21/00
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P95000065651

A0068687

**M. JACK DAVIDSON, CPA
313 WILLIAMS STREET, SUITE 10
POST OFFICE BOX 13372
TALLAHASSEE, FLORIDA 32317**

850-425-3065
FAX: 850-201-0765
e-mail: jpdavid@tlh.fdt.net

July 13, 2000

Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

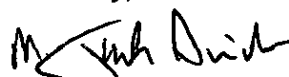
Re: Killearn Antiques, Inc.

Gentlemen:

Per conversation with Kristen at the department, enclosed please find a copy of the above corporations 2000 uniform business report filed March 31, 2000. We are submitting another check for the filing fee of \$ 150.00 because after checking with our bank, this has not cleared.

Thank you for your attention to this matter.

Sincerely,


M. Jack Davidson