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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000069937 (7)

K & H CONSTRUCTION, INC.

509 SIOUX C FT WALTON US	Place of Business	Mailing Address 509 SIOUX CR FT WALTON BEACH FL 3254 US 29. Mailing Address 26 P.O. BOX Suite, Apt. #, etc.	, 100	5	09/ 4. FEIT 58	DO NOT WRITE Incorporated or Qualified 07/1995 Number 3342330 ficate of Status Desired		Ар	
City & Stat		City & State 28 Niceville	FL.			tion Campaign Financing Fund Contribution		\$5.00 Added t	
Zip	Country	Z _{(p}	Country			corporation owes or has	-		
24 32588	- 1025 25 DSA 9. Name and Address of Current	29 32588 · 1025 30	1 45	DA		onal Properly Tax due Ju le and Address of New I			No
- GI	LLOWAY, KEVIN D	Name	10, 11411	to pilo Address of How	togistorou r	180111			
509 SIOUX CR					(1) (1) (1) (1) (1)				
FT WALTON BEACH FL 32547				82 Street Address (P.O. Box Number is Not Acceptable)					
						<u> </u>			
			84	City				85 Zip (Code
44 5						<u>FL</u>	<u> </u>		
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 profited name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. Of FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12									
12.	OFFICERS AND I	DELETE	13.		ווטטא	IONS/CHANGES TO OF		Change	Addition
NAME	GALLOWAY, KEVIN D	_ Mille	1.2 NAME	}	y Gallerian	Vario D		E Change	L Addition
STREET ADDRESS	713 MEADOW CT.		1.3 STREET	ADDRESS	334 70	Kevin D. nacia way]
CITY-ST-ZIP	FT-WALTON-BEACH FL 32547		1.4 CITY - S		Miceville.	FL 32576			
TITLE	D	☐ DELETE	2.1 TITLE		D			Change	Addition
NAME	STEWART, HEIDI		2.2 NAME		Heidi	Galloway			
STREET ADDRESS	TT WALTON DEADLE LOSS		2.3 STREET	ADDRESS	338 Jan	racia way	_		
CITY-ST-ZIP	FT WALTON BEACH FL 32547	DELETE	2. 4 CITY-	ST-ZIP	Nicevil	6 FL 32579	<u> </u>	Change	Addition
TITLE NAME	BRACKETT JAMES ALAN	De Light I	3.1 TITLE 3.2 NAME					Change	☐ AQQIIION
STREET ADDRESS	820 GIBSON DR, 46	,	3.3 STREET	ADDRESS					
CITY-ST-ZIP	FT WALTON BCH FL		3.4. CITY-5						ĺ
TITLE	SECRETARY	DELETE	4.1 TITLE	.,		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME	DEAN BRAFFORD		4. 2 NAME						
STREET ADDRESS	15 North Dr. 30530		4.3 STREET	ADDRESS					
CITY-ST-ZIP	Shalimor FL 32579		4.4 CITY - S	T-ZIP		<u>. </u>			
TITLE	Shalimor FL 32579 Denais Criddle Treasuren	☐ DELET E	5 1 TITLE					Change	Addition
NAME	11 KUSUTER		5.2 NAME						į
STREET ADDRESS	25 Baysture Dr. Yalp. Fl 32578		5.3 STREET						1
CITY-ST-ZIP TITLE	1016 + 1 3-7 1P	☐ DELETE	5.4 CITY - S 6.1 TITLE	I-ZIP				Change	Addition
NAME		V-1011	6.2 NAME						

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 receiver or trusted 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.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

PICHATURE LIGHT MAND

STREET ADDRESS

CITY-ST-ZIP