

07071999-90009-026-\$150.00-\$150.00

AMOUNT DUE ON OR BEFORE 06/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750)

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 JUL 26 AM 10:35

DOCUMENT # P95000079260

1. Corporation Name

KYLER AND GRAHAM, CORP.

Principal Place of Business

25 SE SEMINOLE
APT 301
STUART FL 34994
US

Mailing Address

1055 RIVER RD-708
UNIT 708
EDGEWATER NJ 07020-1361
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/12/1995

4. FEI Number

65-0621158

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

☐

Yes ☐ No

2. Principal Place of Business

2408 SE Sapelo Ave

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Port St Lucie FL

City & State

Port St Lucie FL

Zip

34952

Country

USA

Zip

34952

Country

USA

9. Name and Address of Current Registered Agent

NORTON, BRIAN J
25 SE SEMINOLE ST-301
STUART FL 34994

10. Name and Address of New Registered Agent

81 Name

Norton, Brian J.

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

2408 SE Sapelo Ave

83

84 City

Port St Lucie

FL

85 Zip Code

34952

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

1.1 TITLE

NAME

DTCE
NORTON, BRIAN J

STREET ADDRESS

25 SE SEMINOLS ST-301

CITY-ST-ZIP

STUART FL

☐ DELETE

1.2 TITLE

NAME

DT
CUYLER, ROBERT

STREET ADDRESS

25 SE SEMINOLE ST-301

CITY-ST-ZIP

STUART FL

☐ DELETE

1.3 TITLE

NAME

O
EVELETH, DANIEL

STREET ADDRESS

25 SE SEMINOLE ST-301

CITY-ST-ZIP

STUART FL

☐ DELETE

1.4 TITLE

NAME

P
NORTON, JANET P

STREET ADDRESS

1055 RIVER RD 708

CITY-ST-ZIP

EDGEWATER NJ

☐ DELETE

1.5 TITLE

NAME

V
POWEL, LINDA

STREET ADDRESS

9742 E GELDING DR

CITY-ST-ZIP

SCOTTSDALE AZ

☐ DELETE

1.6 TITLE

NAME

S
MCGAHAN, KATHLEEN A

STREET ADDRESS

25 SE SEMINOLE ST-301

CITY-ST-ZIP

STUART FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☒ Addition

Jerry Randolph

43 Seminole St.

Stuart FL 34994

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☒ Change ☐ Addition

DTCE

Norton, Brian J

2408 SE Sapelo Ave

Port St Lucie FL 34952

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☒ Change ☐ Addition

DT

Cuyler, Robert

261 Colorado Ave - 1

Stuart FL 34994

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/99 201 886 2886

Date

Daytime Phone

CR2E034 (5/99)

KYLER & GRAHAM, Inc.

2408 SE Sapelo Ave.
Port St. Lucie, FL 34952

Administrative Office

Kyler & Graham, Inc.
Attention: J. P. Norton
1055 River Road - 708
Edgewater, NJ 07020-1361
Telephone: 201-886-2886
Fax: 201-886-1007

7/21/99

Division of Corporations
Annual Reports Filings
Attention S. Toner
P.O. Box 6327
Tallahassee, FL 32314

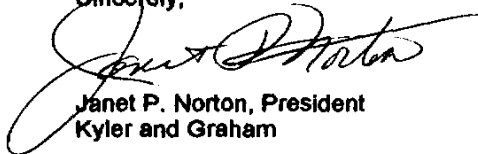
Dear Mr. Toner,

On 7/1/99 I received the Annual Report Packet. This was the first packet received although the packet indicated that it was the second notice. On July 2nd, I called 850-488-9000 and spoke with Danielle. She indicated I should send a check for \$150.00 along with the annual report and a letter explaining the circumstances. I immediately sent out the check, the report and the letter. It was mailed to P.O. Box 1500 in Tallahassee.

On 7/16/99 I received a letter (Letter reference number is P95000079260 - copy enclosed) stating that my check for \$150 had been received but the report had not been filed because there are late fees due in the amount of \$400.00. I called the Division of Corporations and spoke to Carolyn. She indicated I should send a letter to you advising you of the circumstances to date.

I have enclosed a copy of the original letter I sent, a copy of the annual report submitted and a copy of the letter I received dated 7/8/99.

Sincerely,



Janet P. Norton, President
Kyler and Graham