

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090803 (4)

1. Corporation Name

K.W. ASSOCIATES, INC.



Principal Place of Business

901 DUVALL STREET
KEY WEST FL 33041

Mailing Address

901 DUVALL STREET
KEY WEST FL 33041

3. Date Incorporated or Qualified
11/29/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

11469 Olive Blvd.

4. FEI Number
65-0621072

Applied For
Not Applicable

21

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 440

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22

City & State

City & State

St. Louis, Mo

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23

Zip

Country

Zip

63141

Country

St. Louis

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 (Printed if registered agent is not a director)

(Typed if registered agent signature is parent corporation)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
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STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME P
1.3 STREET ADDRESS Edward Vaandstrand
1.4 CITY-STATE-ZIP 101 Roswell Landing Dr.
Roswell, Ga 30075

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME S/D
2.3 STREET ADDRESS Anne R. Parker
2.4 CITY-STATE-ZIP 1140 Tidwell Road
Alpharetta, Ga 30201

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anne R. Parker

X 4/05/96

770-475-7542

CR2E034 (12/95)