

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

APPROVED
AND
FILED

1997 JUN 23 AM 10:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000017213 (5)

1. Corporation Name

K G PROPERTIES OF S.W. FLORIDA, INC.



Principal Place of Business

6035 ESTERO BLVD., #1
FT. MYERS BEACH FL 33931

Mailing Address

6035 ESTERO BLVD., #1
FT. MYERS BEACH FL 33931-4348

3. Date Incorporated or Qualified
02/23/1996

3a. Date of Last Report

2. Principal Place of Business

21 17843 San Carlos Blvd
Suite, Apt. #, etc.

2a. Mailing Address

26 17843 San Carlos Blvd
Suite, Apt. #, etc.

4. FEI Number

65-0645313

Applied For

Not Applicable

22

City & State

23 Ft Myers Bch, FL

27

City & State

28 Ft. Myers Bch, FL

24

Zip

33931

Country

25 USA

29

Zip

33931

Country

30 USA

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOMINIC, STEVEN

6035 ESTERO BLVD., #1 17843 San Carlos Blvd.
FT. MYERS BEACH FL 33931

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 name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME Steve Dominic
STREET ADDRESS 17843 San Carlos Blvd
CITY-ST-ZIP Ft Myers Bch, FL 33931

TITLE ☐ DELETE

NAME V. Pres
STREET ADDRESS Kimberly Dominic
CITY-ST-ZIP 17843 San Carlos Blvd
Ft Myers Bch, FL 33931

TITLE ☐ DELETE

NAME Steve Dominic
STREET ADDRESS 17843 San Carlos Blvd.
CITY-ST-ZIP Ft Myers Bch, FL 33931

TITLE ☐ DELETE

NAME Sec. Kimberly Dominic
STREET ADDRESS 17843 San Carlos Blvd.
CITY-ST-ZIP Ft Myers Bch, FL 33931

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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****165.00 ****165.00

14. I do 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.

CR2E034 (9/96)