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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 04 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000025660 (7)

KERSO CORPORATION

Principal Piac	e of Business	Mailing Address					T TOBITODI TID KOLLA DISHI DOHAF DOHAT DOHAT		0 2 11/0 11/11	
200 SOUTH OF SARASOTA FL	RANGE AVENUE 34238	200 SOUTH ORANGE AVENUE SARASOTA FL 34236-6802								
							3. Date Incorporated or Qualified 03/21/1996	3a. Date	of Last Re	port
2. Principal F	2a. Mailing Address	ddress				4. FEI Number		Ар	plied For	
21		26					65-0657075	Not Applicable		
Suite, Apt.		Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 A Fee Re	
City & Stat	·e	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added to		
Ζφ 24	Country 25	Zip 29	Co 30	Country 30			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 Regis			
	TENSTINE, J. MICHAEL			81	Name)			····	
200 SOUTH ORANGE AVENUE SARASOTA FL 34236				82	Stree	t Addres	ddress (P.O. Box Number is Not Acceptable)			
				83						
					City			FL	85 Zip C	
l office or r	to the provisions of Sections 607.050, registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was	: authorize	ed by	the co	d corpor rporation	ation submits this statement for the pur n's board of directors. I hereby accept t	pose of chi the appoin	nanging its itment as i	registered registered
SIGNATURE	Signature, typost or proted name of registered ago					re required	when reinstating)	DATE		
12. OFFICERS AN							ADDITIONS/CHANGES TO OFFICER		IRECTOR!	S IN 12
TITLE		DELETE		ITLE		D/F			Change	Addition
NAME			1.2 N	IAME		J.	Michael Hartenstine			•
STREET ADDRESS			1.3 STF				S. Orange Ave.			
CITY-ST-20P			1.4 0	HTY-S	T-ŽIP		asota, FL 34236			
TITLE	-	DELETE	2.1 T	ITLE		VP			Change	Addition
NAME			2.2 N	IAME		Cha	rles Varah			
STREET ADORESS					ADDRESS	767	1 The Park Boulevard			
CITY-ST-ZIP					T - ZIP	Unl	versity Park, FL 34:	201		- F-1
TITLE		L-1 DETEIR	3.1 1			S/T		L] Change	Addition
NAME			3.2 N				an A. Barrett			
STREET ADDIRESS					ADDRESS		S. Orange Ave.			
CITY-ST-ZIP TITLE		☐ DELETE	3.4.1 4.1 T		ST-ZIP	Sar	asota, FL 34236		Change	Addition
NAME								L	1 OusuBc	
STHEET ADDRESS				4. 2 NAME 4.3 STREET						
CITY-ST-ZIP				ITY-S						
TITLE		DELETE	5.1 T		1 24	 			Change	Addition
NAME		•		IAME				_		
STREET ADDRESS					address					
CHTY-ST-ZIP			5.4 CITY-ST-ZIP						Į	
TITLE		DELETE	6.1 T						Change	Addition

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

IAME OF SIGNING OFFICER OR DIRECTOR