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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 27 1997 8:00am Secretary of State

1997

DOCUMENT # P96000026729 (9)

I am an efficer or director of the corporation or the receiver or trustee empoy appears in Block 12 or Block 13 if changed, or on an attachment with an ag

SIGNATURE MO TYPHA

SIGNATURE:

YKP ENTERPRISES, INC. Principal Place of Business Mailing Address 7540 NAVARRE PARKWAY 7540 NAVARRE PARKWAY SHITE 1 SHITE 1 NAVARRE FL 32566 NAVARRE FL 32566-7312 3. Date Incorporated or Qualified 3a. Date of Last Report 03/21/1996 SAME 2. Principal Place of Business 2a. Mailing Address Applied For SAME SAME 26 Not Applicable Suite Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žip Country B. This corporation has liability for intangible tax under s. 199.032 24 25 30 Yes No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name PUGH, MICHAEL J 7540 NAVARRE PARKWAY Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 1 **B**3 NAVARRE FL 32566 84 City 85 Zip Code 11. Pursuant to the provisions of Scotions 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 it am familiar with land accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, type diougnosted name of registived agent and to ust applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE TITLE 1.1 TITLE Change Addition KINCAID, ROBERT G III 1.2 NAME 3300 S.W. 23RD STREET, APT. 1 STREET ADDRESS 1.3 STREET ADDRESS NONE **GAINESVILLE FL 32608** CITY ST ZIF 1.4 CITY-ST-ZIP DELETE THUE 21 TITLE Change Addition YATES, WILLIAM A NAME 2.2 NAME 8717 SAND PINE DRIVE STREET ADORESS 2 3 STREET ADDRESS NAVARRE FL 32566 CITY - ST- 2IF 2.4 CITY - ST-ZIP DELETE TITLE 31 TITLE ☐ Change Addition PUGH, MICHAEL J 3.2 NAME 7540 NAVARRE PARKWAY STREET ACTORESS 3.3 STREET ADDRESS **NAVARRE FL 32566** CHY-ST-ZIP 34. CITY-SI-ZIP DELETE TITLE Change 41 TITLE Addition NAME 4.2 NAME STREET ADDRESS. 4.3 STREET ADDRESS CH ri-ST-ZIP 4.4 CITY-SI-ZIP DELETE Change TITLE 5.1 TITLE Addition . NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS C.TY - ST - 74P 54 CHTY-SI-ZIP DELETE TITLE 61 TITLE Change Addition 62 NAME STREET ACCORESS 6.3 STREET ADDRESS C(17 - ST- Z)P 6.4 CITY-ST-ZIP

14. Ido hareby 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 supplier ental annual report is trye and accurate and that my signature shall have the same legal effect as if made under oath; that

OR DIRECTOR

ered to execute this report as required by Chapter 607, Florida Statutes; and that my name