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May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000060609 (0)

1. Corporation Name

THE KATHRYN HENRY GROUP, INC.



Principal Place of Business

1880 NORTH CRYSTAL LAKE DRIVE
NO. 3
LAKELAND FL 33801

Mailing Address

1880 NORTH CRYSTAL LAKE DRIVE
NO. 3
LAKELAND FL 33801-5973

3. Date Incorporated or Qualified

07/19/1996

3a. Date of Last Report

2. Principal Place of Business

21 4940 Southfork Drive

Suite, Apt. #, etc.

22 Suite 1

City & State

23 Lakeland, FL

Zip

24 33813

Country

25 Polk

2a. Mailing Address

26 4940 Southfork Drive

Suite, Apt. #, etc.

27 Suite 1

City & State

28 Lakeland, FL

Zip

29 33813

Country

30 Polk

4. FEI Number

59-3390835

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

ANDERSON, KATHRYN HENRY
1880 NORTH CRYSTAL LAKE DRIVE
NO. 3
LAKELAND FL 33801

10. Name and Address of New Registered Agent

81 Name

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

83 2722 Deerbrook Drive

84 City Lakeland

FL

85 Zip Code 33811

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 D
NAME ANDERSON, KATHRYN HENRY
STREET ADDRESS 1880 NORTH CRYSTAL LAKE DRIVE, NO. 3
CITY-ST-ZIP LAKELAND FL 33801

TITLE
NAME
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CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D
1.2 NAME
1.3 STREET ADDRESS 2722 Deerbrook Drive
1.4 CITY-ST-ZIP Lakeland, FL 33811

2.1 TITLE S/T
2.2 NAME Strayer, Beth B.
2.3 STREET ADDRESS 5019 Lochinvar Court
2.4 CITY-ST-ZIP Lakeland, FL 33813

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE: Kathryn Henry Anderson 4/28/97 (941)644-3242

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0398468

CR2E034 (9/96)