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May 28 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 # P96000069463 (3)

1. Corporation Name

WEST PALM BEACH HEATWAVE INCORPORATED



Principal Place of Business

761 SUGARLOAF BOULEVARD
SUMMERLAND KEY FL 33042

Mailing Address

761 SUGARLOAF BOULEVARD
SUMMERLAND KEY FL 33042-3661

3. Date Incorporated or Qualified

08/19/1996

3a. Date of Last Report

N/A

4. FEI Number

65-0693071

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

2. Principal Place of Business

21 2215 Palm Beach Lakes Blvd
Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 6339
Suite, Apt. #, etc.

City & State

23 West Palm Beach, FL

City & State

28 West Palm Beach, FL

Zip

24 33409

Country

25 Palm Beach

Zip

29 33405-6339

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

KIRK, ALBERT J
761 SUGARLOAF BOULEVARD
SUMMERLAND KEY FL 33042

10. Name and Address of New Registered Agent

81 Name

William N. Kirk

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

101 Greymon Drive

83

84 City

West Palm Beach

FL

85 Zip Code

33405

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 *William N. Kirk*
Signature, typed or printed name of registered agent and title if applicable

William N. Kirk

(NOTE: Registered Agent signature required when reinstating)

5/17/97
DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME KIRK, KATHERINE
STREET ADDRESS 2414 N. WOODLAWN, SUITE 201
CITY-ST-ZIP WICHITA KS 67220

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Katherine Kirk P/D ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 101 Greymon Drive
1.4 CITY-ST-ZIP West Palm Beach, FL 33405

2.1 TITLE William N. Kirk V/S/T/D ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS 101 Greymon Drive
2.4 CITY-ST-ZIP West Palm Beach, FL 33405

3.1 TITLE Skaye A. Kirk V/D ☐ Change ☒ Addition
3.2 NAME
3.3 STREET ADDRESS 1531 N. Ridgewood Dr.
3.4 CITY-ST-ZIP Wichita, KS 67208

4.1 TITLE Albert J. Kirk V/D ☐ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS 1531 N. Ridgewood Drive
4.4 CITY-ST-ZIP Wichita, KS 67208

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: *William N. Kirk, Exec V.P.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/17/97 802-4208
DATE Daytime Phone #

CR2E034 (9/96)