

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000041051

1. Entity Name

KWI, INC.

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90097 015 ***150.00

Principal Place of Business

Mailing Address

7447 BLANDING BLVD.
JACKSONVILLE FL 32244

7447 BLANDING BLVD.
JACKSONVILLE FL 32244-5107

2. Principal Place of Business

3. Mailing Address

2415 South Badcock

2415 South Badcock

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite B

Suite B

City & State

City & State

Melbourne, FL 32901

Melbourne, FL

4. FEI Number

59-3452036

Applied For

Not Applicable

Zip

Country

Zip

Country

32901

US

32901

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KELLY, ROBERT P
7447 BLANDING BLVD.
JACKSONVILLE FL 32244

Name

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

2415 South Babcock

Suite B

City

Melbourne,

FL

Zip Code

32901

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD KELLY, ROBERT P 7447 BLANDING BLVD. JACKSONVILLE FL 32244 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD KELLY, GREGORY W 7447 BLANDING BLVD. JACKSONVILLE FL 32244 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD ROHRBACH, MARIAN 7447 BLANDING BLVD. JACKSONVILLE FL 32244 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD PLUMMER, DAVID 7447 BLANDING BLVD. JACKSONVILLE FL 32244 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD KELLY, EDWARD J 7447 BLANDING BLVD. JACKSONVILLE FL 32244 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2415 South Badcock, Suite B Melbourne, FL 32901 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2415 South Badcock, Suite B Melbourne, FL 32901 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2415 South Badcock, Suite B Melbourne, FL 32901 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition 2415 South Badcock, Suite B Melbourne, FL 32901 |

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert P. Kelly Robert P. Kelly

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/00

Date

Daytime Phone #

CR2E034 (9/99)