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

PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE

Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000097146 (9)

KINGSFIELD ROAD PROPERTIES, INC.

Principal Place of Business

Mailing Address

FILED May 08 1998 8:00am Secretary of State



201 S BAYLEN STREET 201 S BAYLEN STREET SUITE A SHITE A DO NOT WRITE IN THIS SPACE PENSACOLA FL \$2501 PENSACOLA FL 32501 3. Date Incorporated or Qualified 11/14/1997 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 4229 9-3501420 21 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State اني & State پلنټ 6. Election Campaign Financing \$5.00 May Be Pace 23 Added to Fees Trust Fund Contribution 8. This corporation owes or has paid the current year Intangible Santa Rosa antakom 20 Personal Property Tax due June 30. ☐ Yes ΠNo 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SMITH, GREGORY D 201 S BAYLEN STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE A 83 PENSACOLA FL 32501 84 Zip Code 11. Pursuant to the provisions of Sections 607.8602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agost, or both, in the Statu of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar wisk, and accept the obligations of Section 607.0505, Florida Statutes. 30 SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE DAVIS, KAREN NAME 1.2 NAME 325 PIN OAK COURT STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL 32514 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY- ST - ZIP CITY-ST-ZIP ☐ DELETE 31 TITLE Change ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CRTY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - 7IP CITY-ST-ZIP

14. 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 annual report or suppliemental annual population of the corporation of the corporation of 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, own an attachment with an address.

4/36/98