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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90170 029 ***158.75

DOCUMENT # P98000087105 1. Corporation Name	
KEMP & COMPANY, INC.	# 1000/1000

Principal Place	et drive	Mailing Address 33300 SOMERSET DRIVE			<u>,, </u>	_					
LEESBURG FL	34788	LEESBURG FL 34788					DO NOT WRITE	E IN THIS	SPACE		
							3. Date Incorporated or Qualifed 10/08/1998				
2. Principal Pl	ace of Business	2a. Mailing Address					4. FEI Number			App	lied For
21		26					59-3538697	<u>/</u>			Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	-		-		5. Certificate of Status Desired	X .		75 Ad e Req	lditional uired
City & State	e	City & State					6. Election Campaign Financing				1ay Be
23		28					Trust Fund Contribution			ded to	Fees
Zip ·	Country	Zìp	Cour	itry			8. This corporation owes the current	-	ngible V Yes	4	≅No
24	9. Name and Address of Current		30	_	 -		Personal Property Tax. 10. Name and Address of New Re				-
	5. Name and Address of Current	r registered Agent		81	Name -		To really and really and the real and the re	<u></u>	<u> </u>		
	P, JANICE S		-	92	Ct A	dd=0.0	- /D O. Boy Number in Not Acceptable	lo)			
	O SOMERSET DRIVE		1	82	Street A	aares	s (P.O. Box Number is Not Acceptab	16)			
LEES	SBURG FL 34788		Ī	83				<u>.</u>			
			-	84	City				85	Zip C	ode
					•			<u>_ FL</u>			
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was auf	horized	ו עמ	the coroor	orporation'	ation submits this statement for the p 's board of directors. I hereby accept	urpose of o the appoin	tment a	g its r as reg	egistered
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NOTE: F	Registered /	Agent	t signature reg	juired w	rhen reinstating)	DATE			—- j
12.	OFFICERS AN		13.				ADDITIONS/CHANGES TO OFF	CERS AN	D DIRE	СТО	RS IN 12
TITLE	PD	☐ DELETE	1.1 1711	LE					[] Cha	nge	Addition
NAME	KEMP, ROBERT L		1.2 NA	ME							
TITLE PD DE NAME KEMP, ROBERT L STREET ADDRESS CITY-ST-ZIP LEESBURG FL 34788			1.3 STF	REET	ADDRESS						1
CITY-ST-ZIP			1.4 CIT	Y-ST	r-ZIP				F-1 04		- Addition
ππιΕ	STD	☐ DELETE	2.1 TITI						[]] Cha	nge	☐ Addition
NAME	KEMP, JANICE S		2.2 NA		1						ļ
STREET ADDRESS	33300 SOMERSET DRIVE		I .		ADDRESS			750	-	• •	-{
CITY-ST-ZIP	LEESBURG FL 34788	□ DELĒTE	2.4 CIT		T-ZIP			- -	Cha	nae	Addition
TITLE		☐ DELETE	3.1 (III						C ***		
NAME					ADDRESS						
STREET ADDRESS			3.4. CIT		- 1						}
CITY-ST-ZIP TITLE		DELETE	4.1 1111		1.771				Cha	inge	Addition
NAME		_	4. 2 NA								
STREET ADDRESS					ADDRESS		•				
CITY-ST-ZIP			4.4 CIT								
TITLE		☐ DELETE	5.1 T(T)				, , , , , , , , , , , , , , , , , , ,		Cha	inge	Addition
NAME			5.2 NA	ME							
STREET ADDRESS			5.3 STI	REET	ADDRESS						ļ
CITY-ST-ZIP			5.4 CIT		r-zip						
πιε		☐ DELETE	6.1 TIT						☐ Cha	inge	☐ Addition }
NAME			6.2 NA								
STREET ADDRESS			6.3 STI	REET	ADDRESS						

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 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, with all other like empowered.

SIGNATURE: