

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

DOCUMENT # P98000095357

1. Corporation Name

KDC DEVELOPMENT CORPORATION

Principal Place of Business

3100 SCENIC HWY 98 STE 102  
DESTIN FL 32541

Mailing Address

3100 SCENIC HWY 98 STE 102  
DESTIN FL 32541

FILED  
Mar 02, 1999 8:00 am  
Secretary of State

03-02-1999 90026 037 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1998

4. FEI Number

59-3545530

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 422 Bayshore Drive

2a. Mailing Address

26 422 Bayshore Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State  
23 Destin, Florida

27 City & State  
28 Destin, Florida

Zip Country

24 32541

25

Zip Country

29 32541

30

9. Name and Address of Current Registered Agent

KAZEK, JOHN R  
3100 SCENIC HWY 98 STE 102  
DESTIN FL 32541

10. Name and Address of New Registered Agent

81 Name KAZEK, JOHN R.

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

83

84 City Destin

FL

85 Zip Code  
32541

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 ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Pres./Sec./Chairman ☐ Change ☐ Addition  
1.2 NAME John Kazek  
1.3 STREET ADDRESS 422 Bayshore Drive  
1.4 CITY-ST-ZIP Destin, Florida 32541

2.1 TITLE Vice-Pres./Director ☐ Change ☐ Addition  
2.2 NAME Jon Kazek  
2.3 STREET ADDRESS 422 Bayshore Drive  
2.4 CITY-ST-ZIP Destin, Florida 32541

3.1 TITLE Treasurer/Director ☐ Change ☐ Addition  
3.2 NAME Terri Kazek  
3.3 STREET ADDRESS 422 Bayshore Drive  
3.4 CITY-ST-ZIP Destin, Florida 32541

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

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

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-5-99

Daytime Phone #

850-837-2598

CR2E034 (11/98)