

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91739 012 ***150.00

DOCUMENT # P98000106460

1. Entity Name

KELSO COMMUNICATIONS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

1717 FAULDS RD SO

Suite, Apt. #, etc.

1717 FAULDS RD SO

City & State

CLEARWATER FL

City & State

CLEARWATER FL

Zip

33756

Country

USA

Zip

33756

Country

USA

4. FEI Number

59-3547568

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

SHORT, PAUL R.

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

7522 No. 40TH STREET

City

FL

Zip Code

33604

**DO NOT WRITE
IN THIS SPACE**

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 is 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)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P
KELSO, GLEN M. SR.
1717 FAULDS RD SO
CLEARWATER, FL 33756

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

ST
KELSO, HARRIETTE A.
1717 FAULDS RD SO
CLEARWATER, FL 33756

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address with all other like empowered.

SIGNATURE:

Glen M. Kelso Sr. GLEN M. KELSO SR PRES.

5-7-02

727-443-7057

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)