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Apr 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S18434** (8)
1. Corporation Name
KGL CONSTRUCTION, INC.



Principal Place of Business
**1801 JASMINE DR
TALLAHASSEE FL 32308
US**

Mailing Address
**1801 JASMINE DR
TALLAHASSEE FL 32308-5224
US**

3. Date Incorporated or Qualified
12/14/1990

3a. Date of Last Report
05/01/1996

4. FEI Number
59-3049397

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent
**LIEBLONG, KARL G.
6708 CHANT TRAIL
TALLAHASSEE FL 32308**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL **85** Zip Code

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) (NOT: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PSD	☐ DELETE
NAME	LIEBLONG, KURT G.	
STREET ADDRESS	189 2ND AVE. S.E.	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	TD	☐ DELETE
NAME	LIEBLONG, LOIS S	
STREET ADDRESS	1374 STRATFORD DR	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	VD	☐ DELETE
NAME	LIEBLONG, KARL G.	
STREET ADDRESS	1374 STRATFORD DR	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	D	☐ DELETE
NAME	LIEBLONG, DEBRA L.	
STREET ADDRESS	3120 31ST WAY	
CITY-ST-ZIP	W PALM BCH FL	
TITLE	D	☒ DELETE
NAME	LIEBLONG, ROBIN A	
STREET ADDRESS	1014 WASHINGTON AVE	
CITY-ST-ZIP	LARGO FL	
TITLE	D	☐ DELETE
NAME	BROCK, KAREN S.	
STREET ADDRESS	515 N MERIDIAN ST	
CITY-ST-ZIP	TALLAHASSEE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/T/D	☒ Change ☐ Addition
1.2 NAME	LIEBLONG, KURT G.	
1.3 STREET ADDRESS	1801 JASMINE DR	
1.4 CITY-ST-ZIP	TALLAHASSEE, FL 32308	
2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME	LIEBLONG, LOIS S.	
2.3 STREET ADDRESS	6708 CHANT TRAIL	
2.4 CITY-ST-ZIP	TALLAHASSEE FL 32308	
3.1 TITLE	V/D	☒ Change ☐ Addition
3.2 NAME	LIEBLONG, KARL G.	
3.3 STREET ADDRESS	6708 CHANT TRAIL	
3.4 CITY-ST-ZIP	TALLAHASSEE, FL 32308	
4.1 TITLE	D	☒ Change ☐ Addition
4.2 NAME	LIEBLONG, DEBRA L.	
4.3 STREET ADDRESS	4507 POINSETTIA AVE.	
4.4 CITY-ST-ZIP	W. PALM BCH, FL. 33407	
5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	LIEBLONG, LINDA L.	
5.3 STREET ADDRESS	1801 JASMINE DR	
5.4 CITY-ST-ZIP	TALLAHASSEE, FL 32308	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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

SIGNATURE:

[Handwritten Signature] KURT G. LIEBLONG 4/22/97 (904) 211-2969

CR2E034 (9/96)