

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S51351 (2)

1. Corporation Name
KIM E. WELLS, P.A.



Principal Place of Business Mailing Address
2506 MANATEE AVENUE WEST 2506 MANATEE AVENUE WEST
BRADENTON FL 34205 BRADENTON FL 34205

2. Principal Place of Business 2a. Mailing Address
21 Sute, Apt. #, etc. 26 Sute, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip 29 Country 30 Country
24 25 29 30

9. Name and Address of Current Registered Agent

WELLS, KIM E.
2506 MANATEE AVENUE WEST
BRADENTON FL 34205

3. Date Incorporated or Qualified 05/10/1991 3a. Date of Last Report 05/01/1995
4. FEI Number 59-3079050 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
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 date if applicable

(NOTE: Registered Agent signature required when not changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P WELLS, KIM E. ☐ DELETE
NAME 2506 MANATEE AVE W
STREET ADDRESS BRADENTON FL
CITY- ST- ZIP VTS
TITLE ☒ DELETE
NAME PERUSEK, GINGER L
STREET ADDRESS 2506 MANATEE AVE.
CITY- ST- ZIP BRANDENTON FL 34205
TITLE ☐ DELETE
NAME ☐ DELETE
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 F V T S ☐ Change ☒ Addition
1.2 NAME WELLS, KIM E.
1.3 STREET ADDRESS 2506 MANATEE AVE. WEST
1.4 CITY- ST- ZIP BRADENTON, FL 34205
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/96 (941) 748-4446
Date: Day: Month: Year:

CR2E034 (12/95)