**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # \$80989

1. Corporation Name

KARST DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

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

04-23-1999 90106 033 \*\*\*150.00



| 1397 LAKESHOF<br>CLERMONT FL  |  | 1397 LAKESHORE DRIVE<br>CLERMONT FL 34711 |                                       |  |  |            |
|---|--|---|---------------------------------------|--|--|------------|
|   |  |   |                                       | DO NOT WRITE IN THIS S                                 | PACE   |            |
|   |  |   |                                       | 3. Date Incorporated or Qualifed 09/18/1991            |  | 1          |
| 2. Principal Pi   | ace of Ausiness  | 2a, Mailing Address                       | 11                                    | 4. FEI Number  | Apr  | olied For  |
| 21/2/10-6   | Though 115 al  | 26 200 C Sout                             | th . ()(, d )                         | 59-3114340   | Not  | Applicable |
| Suite, Apt. 1   | #, etc.  | Suite, Apt. #, etc.                       |                                       | 5. Certificate of Status Desired                       | <b>\$8.75</b> A Fee Rec                        |            |
| Chy & State  23 (Let Man) Let 28 Clermon 1  |  |   | FL                                    | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 i<br>Added to                           | , ,        |
| 24 24 -   | )     Country   \( \sum_{25} \)   \( \sum_{35} \ | 29 24 ]] 3                                | Country 1                             | 1 Cradital Froperty Tax:                               | Yes  | □No        |
|   | 9. Name and Address of Current   | Registered Agent                          |                                       | 10. Name and Address of New Registered A               | gent   |            |
| NAME GROUPE F. Karst Ja.  |  |   |                                       |  |  |            |
| NARD I, GEUNGE F. J   |  |   |                                       |  |  |            |
| 1391 W. LANESHURE DR. 100 MARS + DEVELOPMENT, 4 N.C.  |  |   |                                       |  |  | <u>C.</u>  |
| CLERMONT FL 34711   |  |   |                                       | -d. C.OC 25  |  | ĺ          |
|   |  |   | 84 City                               | <u> </u>   | 85 Zip C                                       | ode        |
|   |  |   | 1 018                                 | erment FL  | ויכו   |            |
| 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 a   | George to                                 | egistered Agent signature require     | resident 1/211   | 1,   | \          |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |  |   |                                       |  |  |            |
| TITLE   | D .  | ☐ DELETE                                  | 1.1 TITLE                             |  | [*] Change                                     | Addition   |
| NAME  | KARST, GEORGE F., JR.  |   | 1.2 NAME                              |  |  |            |
| STREET ADDRESS  | 1397 W. LAKESHORE DR.  |   | 1.3 STREET ADDRESS                    | ,  |  | Ì          |
| CITY-ST-ZIP   | CLERMONT FL  |   | 1.4 CITY-ST-ZIP                       |  |  |            |
| TITLE   | D  | ☐ DELETE                                  | 2.1 TITLE                             |  | Change   | ☐ Addition |
| NAME  | Karst, Randall Lee   |   | 2.2 NAME                              | san a mark Strank                                      |  |            |
| STREET ADDRESS  | 1259 W. SIXTH ST.  |   | 2.3 STREET ADDRESS                    | 376 LIFFH SIFE   |  |            |
| -CITY-ST-ZIP  | - CLERMONT FL  |   | 2.4 CITY-ST-ZIP - (-                  | 375 FIFTH Street<br>Sterment FG 347                    | <u>)/                                     </u> |            |
| TITLE   | •  | ☐ DELETE                                  | 3.1 TITLE                             |  | Change   | ☐ Addition |
| NAME  | 7  |   | 3.2 NAME                              |  | 1  | }          |
| STREET ADDRESS  |  |   | 3.3 STREET ADDRESS                    |  |  |            |
| CITY-ST-ZIP   | <u> </u>   |   | 3.4. CITY+ST-ZIP                      | ·  |  |            |
| TITLE   |  | ☐ DELETE                                  | 4.1 TITLE                             |  | Change   | ☐ Addition |
| NAME  |  |   | 4. 2 NAME                             |  |  |            |
| STREET ADDRESS  |  |   | 4.3 STREET ADDRESS                    |  |  | İ          |
| CITY-ST-ZIP   |  | T we see                                  | 4.4 CITY-ST-ZIP                       |  | Change   | Addition   |
| TITLE   | ·  | ☐ DELETE                                  | 5.1 TITLE<br>5.2 NAME                 |  |  | L Addison  |
| NAME  |  |   | 5.2 NAME<br>5.3 STREET ADDRESS        |  |  |            |
| STREET ADDRESS  |  |   | 5.3 STREET ADDRESS<br>5.4 CITY-ST-ZIP | ·  |  |            |
| CITY-ST-ZIP   |  | DELETE                                    | 5.4 CITY-\$1-2IP<br>6.1 TITLE         |  | ☐ Change                                       | Addition   |
| TITLE   |  |   | 6.2 NAME                              |  | □ ⇔iginge                                      |            |
| NAME I  |  |   |                                       |  |  | - (        |
| STREET ADDRESS  |  |   | 6.3 STREET ADDRESS                    |  |  | 1          |

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.