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CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 AM 11:14

DOCUMENT # V64789 (3)

1. Corporation Name
M.K. AT THE VINEYARDS, INC.

Principal Place of Business	Mailing Address
2900 14TH ST N SUITE 60 NAPLES FL 33940	2900 14TH ST N SUITE 60 NAPLES FL 33940

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/16/1992
3a. Date of Last Report: 02/03/1994
4. FEI Number: 65-0365905 ☐ 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	2a. Mailing Address
21 2375 TAMIAMI TR. N.	26 2375 TAMIAMI TR. N.
Suite, Apt. #, etc: 22 #208	Suite, Apt. #, etc: 27 #208
City & State: 23 NAPLES, FL	City & State: 28 NAPLES, FL
Zip: 24 33940 Country: 25 USA	Zip: 29 33940 Country: 30 USA

9. Name and Address of Current Registered Agent

CHEFFY, JANE Y.
2900 14TH ST N
SUITE 60
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name: CHEFFY JANE Y.
82 Street Address (P.O. Box Number is Not Acceptable): 2375 TAMIAMI TR. N.
83 #207
84 City: NAPLES FL 85 Zip Code: 33940

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPV	TITLE	DP ☒ Change ☐ Addition
NAME	KESSOUS, MICHAEL J.	NAME	MICHAEL J. KESSOUS
STREET ADDRESS	2900 14TH ST N #60	STREET ADDRESS	2375 TAMIAMI TR. N., #208
CITY-ST-ZIP	NAPLES FL	CITY-ST-ZIP	NAPLES, FL 33940
TITLE	ST	TITLE	ST ☒ Change ☐ Addition
NAME	KESSOUS, MICHAEL J.	NAME	KESSOUS, MICHAEL J.
STREET ADDRESS	2900 14TH ST N #60	STREET ADDRESS	2375 TAMIAMI TR. N., #208
CITY-ST-ZIP	NAPLES FL	CITY-ST-ZIP	NAPLES, FL 33940
TITLE		TITLE	V ☐ Change ☒ Addition
NAME		NAME	HOWARD A. KUYPERS
STREET ADDRESS		STREET ADDRESS	2375 TAMIAMI TR. N., #208
CITY-ST-ZIP		CITY-ST-ZIP	NAPLES, FL 33940
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I the undersigned, certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(1)(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: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/95 DATE 813-649-1230 Daytime Phone

0328431 CP