

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000072330

**Entity Name:** K. G. A., INC.

**Current Principal Place of Business:**

2360 TAMIAMI TRAIL NW  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

2360 TAMIAMI TRAIL NW  
PORT CHARLOTTE, FL 33952

**FEI Number:** 65-0689098

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KONTOS, ANDREW  
1323 BLUE LAKE CIRCLE  
PUNTA GORDA, FL 33983 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PD  
Name KONTOS, ANDREW  
Address 1323 BLUE LAKE CIRCLE  
City-State-Zip: PUNTA GORDA FL 33983

Title VP/D  
Name KONTOS, GUS  
Address 26186 RAMPART BLVD.  
City-State-Zip: PUNTA GORDA FL 33983

Title D  
Name KONTOS, DEBORAH L  
Address 1323 BLUE LAKE CIRCLE  
City-State-Zip: PUNTA GORDA FL 33983

Title D  
Name KONTOS, ROBIN L  
Address 26186 RAMPART BLVD.  
City-State-Zip: PUNTA GORDA FL 33983

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANDREW KONTOS

**PRESIDENT**

**03/31/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date