

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F40184

FILED
Feb 06, 2009
Secretary of State

Entity Name: KENNETH D. RICHARDSON FERNERY, INC.

Current Principal Place of Business:

630 RICHFERN RD
P.O. BOX 121
DELAND, FL 32721

New Principal Place of Business:

630 RICHFERN RD
DELAND, FL 32721

Current Mailing Address:

P.O. BOX 121
DELAND, FL 32721

New Mailing Address:

FEI Number: 59-2099105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDSON, KENNETH D.
630 RICHFERN ROAD
DELAND, FL 32720 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SHERWOOD, MARIA
Address: 1581 16TH STREET
City-St-Zip: ORANGE CITY, FL 32763

Title: PD () Delete
Name: RICHARDSON, KENNETH,
Address: 630 RICHFERN ROAD
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: RICHARDSON, S. MARIA,
Address: 630 RICHFERN ROAD
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: RICHARDSON, KEVIN F
Address: 630 RICHFERN RD
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARIA RICHARDSON

SEC.

02/06/2009

Electronic Signature of Signing Officer or Director

_____ Date