

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002573

**FILED**  
**Jan 10, 2007**  
**Secretary of State**

**Entity Name:** DAN KUYKENDALL ENTERPRISES, INC.

**Current Principal Place of Business:**

115 S. TRAVIS ST  
SHERMAN, TX 75090

**New Principal Place of Business:**

**Current Mailing Address:**

115 S. TRAVIS ST  
SHERMAN, TX 75090

**New Mailing Address:**

FEI Number: 75-2295017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SKRLD, INC.  
201 ALHAMBRA CIRCLE #1102  
CORAL GABLES, FL 33134 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: CP ( ) Delete  
Name: KUYKENDALL, DAN  
Address: 2210 MEADOWS LANE  
City-St-Zip: SHERMAN, TX 75092

Title: VSTD ( ) Delete  
Name: KUYKENDALL, RHONDA J  
Address: 2210 MEADOWS LANE  
City-St-Zip: SHERMAN, TX 75092

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: DAN KUYKENDALL

CP

01/10/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date