2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01445

Entity Name: K C T, INC.

FILED Apr 30, 2002 8:00 AM Secretary of State

Current Pri	incipal Place o	of Business:	New Princip	New Principal Place of Business:		
609 S. KINGS AVE BRANDON, FL 33511 US						
Current Mailing Address:			New Mailing	New Mailing Address:		
C/O VANGUARD 9300 N. 16TH ST TAMPA, FL 33612 US			PO BOX 260	C/O COMMUNITIES OF AMERICA, INC. PO BOX 2608 VALRICO, FL 33595 US		
FEI Number:	59-2380884	FEI Number Applied For ()	El Number Not Applica	able () Certifica	te of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
VANGUARD MANAGEMENT 9300 N. 16TH ST TAMPA, FL 33612 US COMMUNITIES OF AMERICA, INC. PO BOX 2608 VALRICO, FL 33595 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: RICHARD PITROWSKI Electronic Signature of Registered Agent					4/30/2002 Date	
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () C KELLY, GAIL 604 BAINBRIDGE BRANDON, FL 33		Title: Name: Address: City-St-Zip:	()Change() Addition	
Title: Name: Address: City-St-Zip:	VD () C FULTON, CATHEI 607 ST. HENRY C BRANDON, FL 33	DR.	Title: Name: Address: City-St-Zip:	()Change() Addition	
Title: Name: Address: City-St-Zip:	TD () D PETERSON, CAR 601 LYNCHBURG BRANDON, FL 33	BDR	Title: Name: Address: City-St-Zip:	()Change() Addition	
Title: Name: Address: City-St-Zip:	SD () D STURM, JOANNE 606 BAINBRIDGE BRANDON, FL 33	EDR.	Title: Name: Address: City-St-Zip:	()Change() Addition	
Title: Name: Address: City-St-Zip:	D () D FONTE, TINA 605 BAINBRIDGE BRANDON, FL 33		Title: Name: Address: City-St-Zip:	()Change() Addition	
Title: Name: Address: City-St-Zip:	D () C IBIS, ROJAS 609 CHIPPENHAI BRANDON, FL 33		Title: Name: Address: City-St-Zip:	()Change() Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHERINE FULTON VP 04/30/2002