

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2005 8:00 am
Secretary of State

02-10-2005 90056 008 ***150.00

DOCUMENT # P04000156624					
1. Entity Name UNCLE KENNY'S INC.					
Principal Place of Business 6832 MONARCH PARK DRIVE APOLLO BEACH, FL 33572			Mailing Address 6832 MONARCH PARK DRIVE APOLLO BEACH, FL 33572		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country			
4. FEI Number 86-1123399			Applied For ☐ Not Applicable		
5. Certificate of Status Desired			☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent NADEAU, KENNETH C 6832 MONARCH PARK DRIVE APOLLO BEACH, FL 33572			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
FL			Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.		☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NADEAU, MELISSA G 6832 MONARCH PARK DRIVE APOLLO BEACH, FL 33572	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NADEAU, KENNETH C 6832 MONARCH PARK DRIVE APOLLO BEACH, FL 33572	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			813-672-9355 OR 813-477-2930		
SIGNATURE: Kenneth C Nadeau			2-1-05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
Daytime Phone #			Daytime Phone #		