

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000056292

FILED  
Jan 06, 2006  
Secretary of State

Entity Name: KEMPS TRAINING & CONSULTING, INC.

**Current Principal Place of Business:**

805 S. LOIS AVE  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

805 S. LOIS AVE  
TAMPA, FL 33609

**New Mailing Address:**

FEI Number: 59-3390298      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PEARSON, STEVEN L  
805 S. LOIS AVE  
TAMPA, FL 33609      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: D      ( ) Delete  
Name: PEARSON, STEVE  
Address: 805 S. LOIS AVE  
City-St-Zip: TAMPA, FL 33609

Title: D      ( ) Delete  
Name: PEARSON, EILEEN  
Address: 805 S. LOIS AVE  
City-St-Zip: TAMPA, FL 33609

Title: D      ( ) Delete  
Name: PEARSON, PAUL  
Address: 69 S. HIGHLAND AVENUE  
City-St-Zip: OSSINING, NY 10562

Title: D      ( ) Delete  
Name: SEVERS, KRISTINE  
Address: 18124 CRAWLEY ROAD  
City-St-Zip: ODESSA, FL 33556

Title: D      ( ) Delete  
Name: SERRA, MICHELLE  
Address: 7741 THUNDERHEAD STREET  
City-St-Zip: WESLEY CHAPEL, FL 33544

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

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

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

Title: D      (X) Change ( ) Addition  
Name: PEARSON, PAUL  
Address: 3 EVERETT AVENUE  
City-St-Zip: OSSINING, NY 10562

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: STEVEN L. PEARSON

D

01/06/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date