

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000082793

**Entity Name:** KMF, INC.

**Current Principal Place of Business:**

11093 LANE PARK ROAD  
TAVARES, FL 32778

**Current Mailing Address:**

P.O. BOX 357  
TAVARES, FL 32778 US

**FEI Number:** 65-0454857

**Certificate of Status Desired:** No

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

DAVID SCHEINMAN CPA PA  
11919 SW 42ND CT.  
DAVIE, FL 33330 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name FOLEY, THOMAS D  
Address 11093 LANE PARK ROAD  
City-State-Zip: TAVARES FL 32778

Title OFFICER  
Name HOLDER, JUSTIN M  
Address P.O. BOX 357  
City-State-Zip: TAVARES FL 32778

*I hereby 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 all other like empowered.*

**SIGNATURE:** THOMAS FOLEY

D

04/04/2019

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date