


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2004 8:00 am
Secretary of State

06-16-2004 90011 032 ***150.00

DOCUMENT # 285144

1. Entity Name
K. F. PROPERTIES, INC.



Principal Place of Business Mailing Address

% BRIGDON FOSTER **% BRIGDON FOSTER**
405 W. AZEELE STREET **405 W. AZEELE STREET**
TAMPA, FL 33606 US **TAMPA, FL 33606 US**

54057569



2. Principal Place of Business 3. Mailing Address

405 W. AZEELE ST. Suite, Apt. #, etc.

06082004 Chg-P CR2E034 (10/03)

City & State City & State

TAMPA, FL 33606 City & State

Zip Country Zip Country

33606 **U.S.A.** Zip Country

4. FEI Number Applied For

59-1058201 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOSTER, BRIGDON K.
405 W. AZEELE STREET
TAMPA, FL 33606

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

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 *Brigdon K. Foster*
BRIGDON K. FOSTER

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOSTER, KENTON D K.F. PROPERTIES, INC. 3348 MICHENER PL PLANT CITY, FL 33567 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOSTER, KENTON D 10101 CORNERSTONE PL. RIVERVIEW, FL. 33569 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOSTER, BRIGDON K. K.F. PROPERTIES, INC. 3348 MICHENER PL PLANT CITY, FL 33567 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOSTER, BRIGDON K. 405 W. AZEELE ST. TAMPA, FL. 33606 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOSTER, JO'ANN K.F. PROPERTIES, INC. 3348 MICHENER PL PLANT CITY, FL 33567 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOSTER, JO'ANN 10101 CORNERSTONE PL RIVERVIEW, FL. 33569 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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.

SIGNATURE: *Kenton D Foster - President*
KENTON D. FOSTER

JUNE 12, 04 (813) **677-7045**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

54057569

June 12, 04

#285144

Florida Division of Corporations

P.O. Box 1500

Tallahassee, Fl. 32302-1500

To whom it may concern:

I phoned and spoke with a lady advising her I had not received the annual corporate report form.

As I'm going to be out of the U.S.A. for two months, it was requested a form be sent to replace the lost form so that no penalty would be charged for delay in remitting the report and fee.

Thank you for accomodating my request for duplicate form.

Sincerely,

K. F. PROPERTIES, INC

Kenton D Foster

KENTON D. FOSTER - President

405 W. AZEELE ST.

TAMPA, FL 33606