

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 362130

FILED
Apr 15, 2009
Secretary of State

Entity Name: TRIPLE K CORP.

Current Principal Place of Business:

970 PARASOL PLACE
OVIEDO, FL 32766 US

New Principal Place of Business:

Current Mailing Address:

970 PARASOL PLACE
OVIEDO, FL 32766 US

New Mailing Address:

FEI Number: 59-1347393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRIETEMEYER, KAREN
970 PARASOL PLACE
OVIEDO, FL 32766 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: STD () Delete
Name: KRIETEMEYER, KAREN
Address: 970 PARASOL PLACE
City-St-Zip: OVIEDO, FL 32766

Title: PD () Delete
Name: MILLS, RODMAN
Address: 310 BELLINGRATH TERRACE
City-St-Zip: DELAND, FL 32724

Title: VD () Delete
Name: MILLS, JOYCE
Address: 310 BELLINGRATH TERRACE
City-St-Zip: DELAND, FL 32724

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D () Change (X) Addition
Name: MILLS, KEN
Address: 156 GOLDEN BEAR LANE
City-St-Zip: CLEMMONS, NC 27012

Title: D () Change (X) Addition
Name: KETNER, KATHY
Address: 14470 W. WILSHIRE
City-St-Zip: YUKON, OK 73099

I hereby certify that the information supplied with this filing does not qualify 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: KAREN KRIETEMEYER

D

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date