## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 493769**

Entity Name: KEGEL & STILLI, INC.

KEGEL, THOMAS E

133 NW BENTLEY CIRCLE

ST LUCIE WEST, FL 34986

Name:

Address:

City-St-Zip:

FILED Apr 19, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1461 COMMERCE CENTRE PARKWAY PORT ST. LUCIE, FL 34986 **Current Mailing Address: New Mailing Address:** 1461 COMMERCE CENTRE PARKWAY PORT ST. LUCIE, FL 34986 FEI Number: 59-1674493 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KEGEL, EILEEN H 1461 COMMERCE CENTRE PARKWAY PORT ST LUCIE, FL 34986 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition Name: KEGEL, EILEEN HENNESS Name: 1461 COMMERCE CENTRE DRIVE Address: Address: City-St-Zip: PORT ST LUCIE, FL 34986 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BAKER, CHRISTOPHER W Name: 1461 COMMERCE CENTRE PARKWAY Address: Address: City-St-Zip: PORT ST LUCIE, FL 34986 City-St-Zip: ( ) Delete Title: Title: SD () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: EILEEN HENNESSY KEGEL PTD 04/19/2007