## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000005495

Entity Name: KMC MANAGEMENT COMPANY, INC.

FILED Jul 20, 2005 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
P.O. BOX 7	CORD PIKE 7812 ON, DE 1980	3			
Current Mailing Address:			New Mailir	New Mailing Address:	
P.O. BOX 7 WILMINGT	7812 ON, DE 1980	3			
FEI Number:	51-0381898	FEI Number Applied For()	FEI Number Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
537 EAST I TALLAHAS	ATE SERVICE PARK AVENU SSEE, FL 323	IE 01 US			
ine above in the State		submits this statement for the pu	urpose of changing it	s registered office or registered agent, or both,	
SIGNATURE:					
	Electror	nic Signature of Registered Ager	nt	Date	
		3(2)(b), F.S., the corporation did not	receive the prior notice	э.	
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BARR, JOHN G	D PIKE, SUITE 7812	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	LIPSCOMB, ST	D PIKE, SUITE 7812	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MULLEN, CHE	D PIKE, SUITE 7812	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition IOANNOU, ANDREW J 3911 CONCORD PIKE, SUITE 7812 WILMINGTON, DE 19803	
Title: Name: Address: City-St-Zip:	( )	) Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition GILLESPIE, HERBERT J 3911 CONCORD PIKE, SUITE 7812 WILMINGTON, DE	
Title: Name: Address: City-St-Zip:	( )	) Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition MULLEN, CHERYL L 3911 CONCORD PIKE, SUITE 7812 WILMINGTON, DE	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN G. BARR O/D 07/20/2005