2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004309

Entity Name: K & C MANAGEMENT OF NC, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11627 MANISTIQUE WAY 13045 SPRING HILL DR NEW PORT RICHEY, FL 34654 SPRING HILL, FL 34609

Current Mailing Address: New Mailing Address:

11627 MANISTIQUE WAY NEW PORT RICHEY, FL 34654

FEI Number: 56-2222733 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:

KENNEDY, TIMOTHY KENNEDY, TIMOTHY 16319 SWÁN VIEW CIRCLE 11627 MANISTIQUE WAY ODESSA, FL 33556 NEW PORT RICHEY, FL 34654 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: TIMOTHY KENNEDY 05/01/2007

> Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

CHONG, TAE K CHONG, TAE K Name: Name: 3233 RUSSETT PL. 11515 OYSTER BAY CR. Address: Address: City-St-Zip: LAND O' LAKES, FL 34639 City-St-Zip: NEW PORT RICHEY, FL 34654

Title: Title: () Delete (X) Change () Addition KENNEDY, TIMOTHY Name: Name:

KENNEDY, TIMOTHY 16319 SWAN VIEW CIRCLE 11627 MANISTIQUE WAY Address: Address: ODESSA, FL 33556 NEW PORT RICHEY, FL 34654 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete

KENNEDY, HYE Name: KENNEDY, HYE Name:

16319 SWAN VIEW CIRCLE 11627 MANISTIQUE WAY Address: Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip: NEW PORT RICHEY, FL 34654

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: TIMOTHY KENNEDY ٧ 05/01/2007