2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002255

FILED Apr 15, 2008 Secretary of State

Entity Name: KIRBY & ASSOCIATES OF FLORIDA ENTERPRISES, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
9838 OLA BAY MEADOWS ROAD			9838 OLD BAY MEADOWS ROAD	
#208 JACKSONVILLE, FL 322568101		=	#208 JACKSONVILLE, FL 322568101	
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
9-353	NEUSE ROAD			
: 56-2041643	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
BAY MEADO\				
	2568101 US submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
e named entity e of Florida. RE:			d office or registered agent, or both, Date	
named entity e of Florida. RE:Electron	submits this statement for the բ			
named entity e of Florida. RE:Electron	submits this statement for the particles of Registered Against Fund Contribution ().	ent		
e named entity e of Florida. RE: Electror mpaign Financin S AND DIREC CVP (KIRBY, BARBA	submits this statement for the price Signature of Registered Age g Trust Fund Contribution (). STORS:) Delete ARA ALLS OF NEUSE ROAD, #149-353	ent	Date	
	BAY MEADON IVILLE, FL 32: Iailing Addres W FALLS OF N 0-353 NC 27614 : 56-2041643 I Address of C L, RICK BAY MEADON	BAY MEADOWS ROAD IVILLE, FL 322568101 Iailing Address: W FALLS OF NEUSE ROAD 3-353 NC 27614 : 56-2041643 FEI Number Applied For () I Address of Current Registered Agent: LL, RICK BAY MEADOWS ROAD	BAY MEADOWS ROAD 9838 OLD BAY MEAD #208 JACKSONVILLE, FL 3 Iailing Address: W FALLS OF NEUSE ROAD 9-353 NC 27614 56-2041643 FEI Number Applied For () I Address of Current Registered Agent: New Mailing Address New Mailing Address	

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: DAVID W. KIRBY P 04/15/2008