

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000004697

Entity Name: K & G ASSOCIATES, INC.

FILED  
Jan 13, 2011  
Secretary of State

**Current Principal Place of Business:**

1150 STEPHENSON HWY  
TROY, MI 48084

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3395  
PEACHTREE CITY, GA 30269

**New Mailing Address:**

FEI Number: 01-0571739

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CAMPEAU, GARY  
118 YUMA WAY, TALL PINES PARK  
FT. PIERCE, FL 34946 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

**OFFICERS AND DIRECTORS:**

Title: CPT  
Name: KREHEL, JOSEPH  
Address: 208 BRIDGE POINT  
City-St-Zip: PEACHTREE CITY, GA 30269

Title: DVS  
Name: GORMAN, THOMAS P  
Address: 3811 EASTBOURNE RD  
City-St-Zip: TROY, MI 48084

Title: D  
Name: TROYER, WENDY  
Address: 1274 REDFIELD RIDGE  
City-St-Zip: ATLANTA, GA 33033

Title: T  
Name: KREHEL, JOSEPH  
Address: 208 BRIDGE POINT  
City-St-Zip: PEACHTREE CITY, GA 30269

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH KREHEL

CPT

01/13/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date