


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # F93000001184 1. Entity Name K SQUARE CONSULTING, INC.	
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Principal Place of Business 540 WATSON DR. INDIALANTIC, FL 32903	Mailing Address 540 WATSON DR. INDIALANTIC, FL 32903
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04102007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-1935127	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

KEITH, RICHARD KENT  
540 WATSON DR.  
INDIALANTIC, FL 32903

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDP KEITH, RICHARD KENT 540 WATSON DR. INDIALANTIC, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD KEITH, MARY HELEN 540 WATSON DR. INDIALANTIC, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KEITH, MARY HELEN 540 WATSON DR. INDIALANTIC, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KEITH, JENNIFER MARIE 404 HILLSIDE DR GREENSBORO, NC 27401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000705874  
04/24/07-80012-004 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Kent Keith Richard Kent Keith April 12, 2007 321-722-0587  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #