

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G50443

FILED  
May 01, 2009  
Secretary of State

Entity Name: K.C. ENTERPRISES OF VERO BEACH, INC.

**Current Principal Place of Business:**

1669 OLD DIXIE HIGHWAY  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 368  
VERO BEACH, FL 32961

**New Mailing Address:**

FEI Number: 59-2310110

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANDOR, CHERYL S.  
1669 OLD DIXIE HWY  
VERO BEACH, FL 32960 US

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

SANDOR, CHERYL S SDT  
1669 OLD DIXIE HWY  
VERO BEACH, FL 32960 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: CHERYL S. SANDOR

05/01/2009

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:**

Title: PD ( ) Delete  
Name: SANDOR, KENNTH V  
Address: 1669 OLD DIXIE HWY  
City-St-Zip: VERO BCH, FL

Title: SDT ( ) Delete  
Name: SANDOR, CHERYL S.  
Address: 1669 OLD DIXIE HWY  
City-St-Zip: VERO BCH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SANDOR, KENNTH V  
Address: 1669 OLD DIXIE HWY  
City-St-Zip: VERO BCH, FL 32966

Title: SDT (X) Change ( ) Addition  
Name: SANDOR, CHERYL S.  
Address: 1669 OLD DIXIE HWY  
City-St-Zip: VERO BCH, FL 32966

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: CHERYL S. SANDOR

SDT

05/01/2009

Electronic Signature of Signing Officer or Director

Date