2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G77545

FILED Feb 22, 2009 Secretary of State

Entity Name: KENNETH HUNTER ENTERPRISES, INC.

urrent P	rincipal Place	of Business:	New Principal Place	e of Business:
	IMETER DRIVE PRTH, FL 33467			
urrent N	Mailing Address	s:	New Mailing Addres	ss:
	IMETER DRIVE PRTH, FL 33467			
El Number	: 59-2350103	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
	IMETER DRIVE PRTH, FL 33467	'US		
	e named entity si e of Florida.	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both
	e of Florida.	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or botr
the State	e of Florida. RE:	ubmits this statement for the p c Signature of Registered Ag		ed office or registered agent, or both Date
the State	e of Florida. RE: Electroni			ed office or registered agent, or both Date
the State	e of Florida. RE: Electroni	c Signature of Registered Ag Trust Fund Contribution ().	ent	
the State	e of Florida. RE: Electroni mpaign Financing S AND DIRECT	c Signature of Registered Ag Trust Fund Contribution (). CORS: Delete ETH, ER DR.	ent	Date
the State IGNATUI ection Car FFICER: tle: ame: ddress:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DP ()I HUNTER, KENNE 3356 PERIMETE LAKE WORTH, F	c Signature of Registered Agr Trust Fund Contribution (). CORS: Delete ETH, ER DR. EL Delete E, ER DR.	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTO
the State GNATUI ection Car FFICER ele: ame: ldress: ty-St-Zip: ele: ame: ldress:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DP ()I HUNTER, KENNE 3356 PERIMETE LAKE WORTH, F DSV ()I HUNTER, ELAINI 3356 PERIMETE LAKE WORTH, F DTV ()I HUNTER, HARRY 162 HILLSIDE AV	c Signature of Registered Ag Trust Fund Contribution (). CORS: Delete ETH, ER DR. FL Delete E, ER DR. FL Delete E, ER DR. FL Delete E, ER DR. FL	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date BES TO OFFICERS AND DIRECTO () Change () Addition

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: HARRY E HUNTER DTV 02/22/2009