## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H93221

Entity Name: KRL ENTERPRISES, INC.

FILED Aug 09, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

25897 US 19 N 4930 AUGUSTA DR

CLEARWATER, FL 33763 US OLDSMAR, FL 34677 US

**Current Mailing Address: New Mailing Address:** 

25897 US 19 N 4930 AUGUSTA DR

CLEARWATER, FL 33763 US OLDSMAR, FL 34677 US

FEI Number: 59-2708630 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LEVINE, KENNETH G LEVINE, KENNETH G 25897 ÚS 19 N 4930 AÚGUSTA DR CLEARWATER, FL 33763 US US OLDSMAR, FL 34677

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: 08/09/2004

> 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:**

in the State of Florida.

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD () Delete (X) Change ( ) Addition LEVINE, KENNETH G LEVINE, KENNETH G Name: Name: 25897 US 19 N Address:

4930 AUGUSTA DR Address: City-St-Zip: CLEARWATER, FL 33763 City-St-Zip: OLDSMAR, FL 34677

Title: STD Title: STD (X) Change ( ) Addition () Delete

Name: LEVINE, REGINA B Name: LEVINE, REGINA B 25897 US 19 N Address: 4930 AUGUSTA DR Address: CLEARWATER, FL 33763 OLDSMAR, FL 34677 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEN LEVINE **PVD** 08/09/2004