

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J11375

Entity Name: KELLEY'S INC., BELL

FILED
Oct 22, 2007
Secretary of State

Current Principal Place of Business:

1219 N. MAIN ST.
BELL, FL 32619

New Principal Place of Business:

Current Mailing Address:

PO BOX 99
BELL, FL 32619

New Mailing Address:

FEI Number: 59-2661159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLEY, TIMMY A.
1219 N. MAIN ST.
BELL, FL 32619 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: DP () Delete
Name: KELLEY, TIMMY A.,
Address: 706 WIDEMAN ST
City-St-Zip: BRANFORD, FL 32008

Title: D () Delete
Name: KELLEY, TERESA S.,
Address: 706 WIDEMAN ST
City-St-Zip: BRANFORD, FL 32008

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: KELLEY, TERESA S.,
Address: 706 WIDEMAN ST
City-St-Zip: BRANFORD, FL 32008

Title: AVP () Change (X) Addition
Name: HOWELL, ALAN L.,
Address: 5589 S W 40TH ST
City-St-Zip: BELL, FL 32619

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: TIMMY A KELLEY

DP

10/22/2007

Electronic Signature of Signing Officer or Director

Date