

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J27459

Entity Name: K R LIMITED OF FLORIDA, INC.

FILED
Sep 22, 2009
Secretary of State

Current Principal Place of Business:

4890 WEST KENNEDY BLVD
SUITE 610
TAMPA, FL 33609

New Principal Place of Business:

2202 N WESTSHORE BLVD
SUITE 200
TAMPA, FL 33607

Current Mailing Address:

4890 WEST KENNEDY BLVD.
SUITE 610
TAMPA, FL 33609

New Mailing Address:

2202 N WESTSHORE BLVD
SUITE 200
TAMPA, FL 33607

FEI Number: 59-2718220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COY, GEOFF
4890 W.KENNEDY BLVD.
SUITE 610
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

COY, GEOFF
2202 N WESTSHORE BLVD
SUITE 200
TAMPA, FL 33607 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: GEOFF COY

09/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: COY, GEOFF
Address: 4890 W.KENNEDY BLVD. #610
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: COY, GEOFF
Address: 2202 N WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33607

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: GEOFF COY

PRES

09/22/2009

Electronic Signature of Signing Officer or Director

Date