

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005 8:00 am
Secretary of State

02-22-2005 90026 022 ***158.75

DOCUMENT # J61106	
1. Entity Name KINETIC STUMP CUTTER, INC.	



Principal Place of Business 19013 ORLANDO ROAD S FORT MYERS, FL 33912-3719 US	Mailing Address POB OX 372 ESTERO, FL 33928-0372
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00017479

2. Principal Place of Business 1231 E. 8 TH AVE.	3. Mailing Address P.O. Box 903
Suite, Apt. #, etc.	Suite, Apt. #, etc.



02172005 Chg-P CR2E034 (10/03)

City & State MOUNT DORA, FL	City & State MOUNT DORA, FL
Zip 32757-5103	Zip 32756-0903
Country USA	Country USA

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MOLLBERG, RUSSELL E 19013 ORLANDO ROAD S FORT MYERS, FL 33912	
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7. Name and Address of New Registered Agent	
Name RUSSELL E. MOLLBERG JR.	
Street Address (P.O. Box Number is Not Acceptable) 1231 E. 8 TH AVE.	
City MOUNT DORA	FL Zip Code 32757

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE <i>Russell E. Mollberg Jr.</i> RUSSELL E. MOLLBERG JR.	2-18-05
(NOTE: Registered Agent signature required when reinstating)	

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT MOLLBERG, RUSSELL E. JR. 19013 ORLANDO ROAD S FORT MYERS, FL 339123719 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MOLLBERG, PAUL R. 331 16TH ST S.E. NAPLES, FL 34151 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MOLLBERG, RUSSELL J 19013 ORLANDO ROAD S FORT MYERS, FL 339123719 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MOLLBERG, DOROTHEA J 19013 ORLANDO ROAD S FORT MYERS, FL 339123719 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ZAUGG, KRISTINE D 133 LAKESIDE CR JUPITER, FL 33458 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1231 E. 8 TH AVE MOUNT DORA, FL 32757
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2798 AMBERWOOD CT. NAPLES, FL 34120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1231 E. 8 TH AVE. MOUNT DORA, FL 32757
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <i>Russell E. Mollberg Jr.</i> RUSSELL E. MOLLBERG JR.	2-18-05 (352)735-4737
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	