2004 FOR PROFIT CORPORATION

FILED May 13, 2004 08:00 AM ıte

ANNOAL REPORT					C C
DOCUMENT # J97362 1. Entity Name KEN HATLEY AND ASSOCIATES ENTERTAINMENT MANAGEMENT CORP., INC.					Šecretary of Sta
Principal Place 486 W. OSCE CLERMONT, I	OLA STREET	Mailing Address 486 W. OSCEOLA STREET CLERMONT, FL 34711		 	
DO NOT WRITE IN THIS SPAC 8. Name and Address of Gurrent Registered Agent				03052003 No Chg-P CR2E034 (10/03) 4. PEI Number	
486 W. ÓS	KENNETH W SCEOLA ST. IT, FL 34711	Junetary Affects	DO NOT WRITE IN THIS SPACE		
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Horida. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature typed or printed name of registered agent and life if applicable (NOTE: Registered Agent aignature required when reinstating) DATE					
FILE NOWII: FEE IS \$150.00 Due by September 8, 2004 9. Election Campaign Final Trust Fund Contribution			ncing \$5		
TIG. TITLE MAME STREET ADDRESS CITY-ST-JIP ITLE NAME	OFFICERS AND DIRECTORS PS HATLEY, KENNETH W 486 W. OSCEOLA ST. CLERMONT, FL 34711 SEC DONNA, HATLEY S		U00000160125 05/13/04-80008-016 150.00		
STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS	ZIP CLERMONT, FL 34711 DORESS ZIP		DO NOT WRITE IN THIS SPACE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					

12. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: DONNA M. HATLEY SEC. SKINATURE AND TYPED OR PRINTED HAME OF SKINING OFFICER OR DIRECTOR