

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # K27444

1. Entity Name
KRISTEN KENNEY DESIGN, INC.



Principal Place of Business

% KRISTEN KENNEY
18 SURREY ROAD
PALM BEACH GARDENS, FL 33418

Mailing Address

% KRISTEN KENNEY
18 SURREY ROAD
PALM BEACH GARDENS, FL 33418



02162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0098816

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KENNEY-KNIGHT, KRISTEN
18 SURREY ROAD
PALM BEACH GARDENS, FL 33418

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IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000686990
04/10/07-80023-003 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME KENNEY-KNIGHT, KRISTEN
STREET ADDRESS 18 SURREY ROAD
CITY-ST-ZIP PALM BEACH GRDNS, FL

TITLE VD
NAME KENNEY, ANN N.
STREET ADDRESS 3829 PASEO NAVARRA
CITY-ST-ZIP W. PALM BEACH, FL

TITLE STD
NAME KENNEY, FRED P.
STREET ADDRESS 3829 PASEO NAVARRA
CITY-ST-ZIP W. PALM BEACH, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Kristen Kenney Knight 3/20/07 (561) 351 3493