

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K85948

FILED
Feb 16, 2010
Secretary of State

Entity Name: K'S HOUSE OF CHARM, INC.

Current Principal Place of Business:

% CAROLYN POOL
1234 OCEANSHORE BLVD
ORMOND BEACH, FL 321763620

New Principal Place of Business:

% CAROLYN POOL SCHAEFFER
1234 OCEANSHORE BLVD
ORMOND BEACH, FL 321763620

Current Mailing Address:

% CAROLYN POOL
1234 OCEANSHORE BLVD
ORMOND BEACH, FL 321763620

New Mailing Address:

% CAROLYN POOL SCHAEFFER
1234 OCEANSHORE BLVD
ORMOND BEACH, FL 321763620

FEI Number: 59-1951847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POOL, CAROLYN
1234 OCEANSHORE BLVD.
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

SCHAEFFER POOL, CAROLYN
1234 OCEANSHORE BLVD.
ORMOND BEACH, FL 32176 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: CAROLYN POOL SCHAEFFER

02/16/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: SCHAEFFER CAROLYN
Address: 1234 OCEANSHORE BLVD
City-St-Zip: ORMOND BEACH, FL 32176 US

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN POOL SCHAEFFER

O/D

02/16/2010

Electronic Signature of Signing Officer or Director

Date