## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L48737

FILED Apr 08, 2006 Secretary of State

Entity Name: KILE'S PROPERTY MANAGEMENT, INC. **Current Principal Place of Business: New Principal Place of Business:** C/O KAREN L. KILE 640 N. TAMIAMI TRAIL NOKOMIS, FL 34275 **New Mailing Address: Current Mailing Address:** C/O KAREN L. KILE 640 N. TAMIAMI TRAIL NOKOMIS, FL 34275 FEI Number: 65-0172703 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KILE, KAREN L 640 N. TAMIAMI TRAIL NOKOMIS, FL 34275 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title:

Title: ( ) Delete (X) Change ( ) Addition KILE, BRUCE E., KILE, BRUCE E., Name: Name: 303 DULMEA DRIVE 303 DULMEA DRIVE Address: Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: NOKOMIS, FL 34275 Title: Title: () Delete (X) Change ( ) Addition

KILE, KAREN L., Name: KILE. KAREN L.. Name: 303 DULMEA DRIVE Address: 303 DULMEA DRIVE Address: NOKOMIS, FL 34275 NOKOMIS, FL 34275 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: KAREN KILE 04/08/2006 D