


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L70991</b>		
1. Entity Name K-2, INC.		
Principal Place of Business C/O WILLIAM K. SCRUGGS, JR. 656 N. BEAL PARKWAY FORT WALTON BEACH, FL 32547	Mailing Address C/O WILLIAM K. SCRUGGS, JR. 656 N. BEAL PARKWAY FORT WALTON BEACH, FL 32547	



03172005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3012943	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

SCRUGGS, WILLIAM K JR  
656 N. BEAL PARKWAY  
FORT WALTON BEACH, FL 32547

**DO NOT WRITE  
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

*William K Scruggs Jr*  
Signature, typed or printed name of registered agent and title if applicable

4/30/05  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	SCRUGGS, KIM Y
STREET ADDRESS	656 N. BEAL PARKWAY
CITY-ST-ZIP	FT. WALTON BEACH, FL 32547

TITLE	D
NAME	SCRUGGS, WILLIAM K JR
STREET ADDRESS	656 N. BEAL PARKWAY
CITY-ST-ZIP	FT. WALTON BEACH, FL 32547

TITLE	
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CITY-ST-ZIP	

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05/04/05-80025-005 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

*William K Scruggs Jr*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/05  
Date

850 863 4270  
Daytime Phone #