2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# L93488

Entity Name: K-CORP. LEE, INC.

Current Principal Place of Business:

13180 NORTH CLEVELAND AVENUE
SUITE #111
NORTH FT. MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

13180 NORTH CLEVELAND AVENUE
SUITE #111
NORTH FT. MYERS, FL 33903

New Mailing Address:

FEI Number: 65-0219267 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GYARMATHY, JAMES P.
13180 N. CLEVELAND AVENUE
SUITE 111
NORTH FT. MYERS, FL 33903 US

Name and Address of New Registered Agent:

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:

Title:	DPS	( ) Delete
Name:	GYARMATHY, JAMES P.	
Address:	13180 N. CLEVELAND AVE.	
City-St-Zip:	N. FT. MYERS, FL	
Title:	T	( ) Delete
Name:	GYARMATHY, JAMES P.	
Address:	13180 NORTH CLEVELAND AV	
City-St-Zip:	NORTH FT. MYERS, FL	
Title:	V	( ) Delete
Name:	POLVERARI, BONNIE	
Address:	13180 N CLEVELAND AVE 11	
City-St-Zip:	FORT MYERS, FL 33903	
Title:	V	( ) Delete
Name:	MONTOGOMERY, MONICA	
Address:	13180 N CLEVELAND AVE 11	
City-St-Zip:	FORT MYERS, FL 33903	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JAMES GYARMATHY DPS 04/22/2009

Electronic Signature of Signing Officer or Director — Date