

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L93488

Entity Name: K-CORP. LEE, INC.

FILED  
May 13, 2010  
Secretary of State

**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

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: GYARMATHY, JAMES P.  
Address: 13180 N. CLEVELAND AVE.  
City-St-Zip: N. FT. MYERS, FL

Title: T  
Name: GYARMATHY, JAMES P.  
Address: 13180 NORTH CLEVELAND AV  
City-St-Zip: NORTH FT. MYERS, FL

Title: V  
Name: POLVERARI, BONNIE  
Address: 13180 N CLEVELAND AVE 11  
City-St-Zip: FORT MYERS, FL 33903

Title: V  
Name: MONTGOMERY, MONICA  
Address: 13180 N CLEVELAND AVE 11  
City-St-Zip: FORT MYERS, FL 33903

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: JAMES GYARMATHY

DPS

05/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date