

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M70286

Entity Name: K.J.R. PIZZA, INC.

FILED  
Apr 10, 2009  
Secretary of State

**Current Principal Place of Business:**

6989 SEMINOLE BOULEVARD  
#6  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

6989 SEMINOLE BOULEVARD  
#6  
SEMINOLE, FL 33772

**New Mailing Address:**

FEI Number: 59-2879705      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHEAR, ROBERT L.  
2600 MCCORMICK DR  
PRESTIGE PLACE, STE 230  
CLEARWATER, FL 34619 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: PD ( ) Delete  
Name: GREEN, KEVIN E.  
Address: 535 JOHNS ROSS AVE.  
City-St-Zip: MADERIA BCH, FL 33708

Title: VD ( ) Delete  
Name: HEARN, JAMES R.  
Address: 2109-D MAIN STREET  
City-St-Zip: DUNODA, FL 34398

Title: STD ( ) Delete  
Name: KRAMER, RAYMOND  
Address: 40114 US 19N  
City-St-Zip: TARPON SPRINGS, FL 33689

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GREEN, KEVIN E.  
Address: 535 JOHNS PASS AVE.  
City-St-Zip: MADEIRA BCH, FL 33708

Title: VD (X) Change ( ) Addition  
Name: HEARN, JAMES R.  
Address: 2109-D MAIN STREET  
City-St-Zip: DUNEDIN, FL 34398

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: KEVIN E GREEN

PD

04/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date