2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000460

Entity Name: L & K TEEN SUMMIT INC.

FILED Jun 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1580 BROOK FOREST DRIVE JACKSONVILLE, FL 32208 **Current Mailing Address: New Mailing Address:** 1580 BROOK FOREST DRIVE JACKSONVILLE, FL 32208 FEI Number: 13-4232478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JAMES, FELICIA L 3107 SPRING GLEN RD. STE. 205 JACKSONVILLE, FL 32208 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete JAMES, FELICIA L JAMES, FELICIA L Name: Name: 1580 BROOK FOREST DRIVE Address: 1580 BROOK FOREST DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: JACKSONVILLE, FL 32208 Title: VD () Delete Title: (X) Change () Addition Name: NEWSOME, SONYA Name: NEWSOME, SONYA Address: 2923 DIGNAN STREET Address: 2923 DIGNAN STREET City-St-Zip: JACKSONVILLE, FL 32254 City-St-Zip: JACKSONVILLE, FL 32254 Title: () Delete Title: () Change () Addition LONG, JENNIFER Name: Name: 2760 WEST 45TH ST. Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: () Delete Title: SD Title: () Change () Addition Name: LONG, JOYCE Name: 6809 CAVALIER ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: Title: () Delete Title: () Change () Addition LONG, JIMMIE L Name: Name: 1706 ART MUSEUM DR., L-9 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: () Delete Title: () Change (X) Addition JAMES, SHERYLL D Name: Name: Address: Address: 1580 BROOK FOREST DRIVE JACKSONVILLE, FL 32208 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 Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FELICIA L JAMES CEO 06/30/2005