

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002295

FILED
May 01, 2008
Secretary of State

Entity Name: KEPHA COMMUNICATIONS, INC.

Current Principal Place of Business:

117 1/2 HENDERSON ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

3033 O'BRIEN DR
TALLAHASSEE, FL 32309

New Mailing Address:

201 W. PARK AVE.
SUITE 11
TALLAHASSEE, FL 32301

FEI Number: 30-0302285 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

FINKLEA, JODY L ESQ.
2061-2 DELTA WAY
TALLAHASSEE, FL 32303 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: D () Delete
Name: CONROY, BRUCE R
Address: 3033 O'BRIEN DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: MANGAN, MICHAEL
Address: 3807 SAMPSON CT
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: CALAMAS, CHRISTA
Address: 600 VICTORY GARDENS DR B-12
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: SALANCY, FRANCIS
Address: 945 RIDGE RD
City-St-Zip: MONTICELLO, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CONROY, BRUCE R
Address: 3033 O'BRIEN DR
City-St-Zip: TALLAHASSEE, FL

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: D () Change (X) Addition
Name: BOND, PETER
Address: 2057 W. FOREST DR.
City-St-Zip: TALLAHASSEE, FL

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE CONROY

D

05/01/2008

Electronic Signature of Signing Officer or Director

Date