

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005185

FILED
Apr 29, 2009
Secretary of State

Entity Name: KFL, INC.

Current Principal Place of Business:

13045 SUMMERFIELD SQ DRIVE
RIVERVIEW, FL 33578

New Principal Place of Business:

Current Mailing Address:

13045 SUMMERFIELD SQ DRIVE
RIVERVIEW, FL 33578

New Mailing Address:

FEI Number: 41-2206716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGLIN, MICKEL MD
13045 SUMMERFIELD SQ DRIVE
RIVERVIEW, FL 33578 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: PVT () Delete
Name: ANGLIN, MICKEL MD
Address: 13045 SUMMERFIELD SQ DRIVE
City-St-Zip: RIVERVIEW, FL 33578

Title: D () Delete
Name: DUQUE, WALTER
Address: 18917 DUQUESNE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: ALTIDOR, KERBY
Address: 8503 STANDISH BEND DRIVE
City-St-Zip: TAMPA, FL 33615

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:

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: MICKEL ANGLIN

PVT

04/29/2009

Electronic Signature of Signing Officer or Director

Date