

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003473

Entity Name: K.W. PERFORMERS, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

2426 W BEAVER ST.
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2756
JACKSONVILLE, FL 32203 US

New Mailing Address:

FEI Number: 59-3609294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSTON, DAVID
3679 CRIMSON OAKS DRIVE
JACKSONVILLE, FL 32277 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: WILLIAMS, GELNDA
Address: 7459 PROXIMA ROAD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: COTTON, ALFRED
Address: 803 BAKER AVENUE
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: ALBERTIE, LEWIS
Address: 766 MELSON AVE
City-St-Zip: JACKSONVILLE, FL 32254

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: ALFRED COTTON

D

04/29/2008

Electronic Signature of Signing Officer or Director

Date