## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000003473

Entity Name: K.W. PERFORMERS, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2426 W BEAVER ST. JACKSONVILLE, FL 32209

Current Mailing Address: New Mailing Address:

P.O. BOX 2756

JACKSONVILLE, FL 32203 US

FEI Number: 59-3609294 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BOSTON, DAVID 3679 CRIMSON OAKS DRIVE JACKSONVILLE, FL 32277 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:

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Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 WILLIAMS, GELNDA
 Name:
 CAIN, MELANIE

 Address:
 7459 PROXIMA ROAD
 Address:
 7459 PROXIMA ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name:COTTON, ALFREDName:JOHNSON, SHEILAAddress:803 BAKER AVENUEAddress:P.O BOX 2756

City-St-Zip: JACKSONVILLE, FL 32209 City-St-Zip: JACKSONVILLE, FL 32203

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ALBERTIE, LEWIS
 Name:
 TUKES, EVELYN

 Address:
 766 MELSON AVE
 Address:
 P.O BOX 2756

City-St-Zip: JACKSONVILLE, FL 32254 City-St-Zip: JACKSONVILLE, FL 32203

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: MELANIE CAIN D 04/29/2009