

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000002339

FILED
Apr 29, 2009
Secretary of State

Entity Name: KENNETH BARBER & ASSOCIATES, INCORPORATED

Current Principal Place of Business:

650 WEST BREVARD STREET
TALLAHASSEE, FL 32304 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6364
TALLAHASSEE, FL 323146364

New Mailing Address:

FEI Number: 59-3625720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBER, KENNETH
650 WEST BREVARD STREET
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

BARBER, KENNETH L
650 WEST BREVARD STREET
TALLAHASSEE, FL 32304 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: KENNETH BARBER

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARBER, KENNETH L
Address: 1077 ROCKBROOK COURT
City-St-Zip: TALLAHASSEE, FL 32311

Title: VPD () Delete
Name: BARBER, KENTRYCE L
Address: 3733 WEETAMOO CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: GLENN, LU BENNIE
Address: 1326 COLORADO ST
City-St-Zip: TALLAHASSEE, FL 32304

Title: DD () Delete
Name: NICHOLSON, CATHERINE S
Address: 2909 PONTIAC
City-St-Zip: TALLAHASSEE, FL 32301

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:

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

SIGNATURE: KENNETH BARBER

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date