

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90092 037 ***150.00

DOCUMENT # P00000019441

1. Entity Name
K.T. SSON, INC.



Principal Place of Business
6831 WHITFIELD INDUSTRIAL AVENUE #F
SARASOTA, FL 34243

Mailing Address
6831 WHITFIELD INDUSTRIAL AVENUE #F
SARASOTA, FL 34243

50011214



2. Principal Place of Business

2110 60TH DRIVE EAST

3. Mailing Address

2110 60TH DRIVE EAST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01202005

Chg-P

CR2E034 (10/03)

City & State

BRADENTON, FL

City & State

BRADENTON, FL

4. FEI Number

65-0984812

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

Zip

Country

34203

USA

Zip

Country

34203

USA

6. Name and Address of Current Registered Agent

KING, CLIFFORD M
2033 MAIN STREET
SUITE 303
SARASOTA, FL 34237

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT
NAME OLSSON, RICHARD K ☐ Delete
STREET ADDRESS 6722 CARLYLE LANE
CITY-ST-ZIP SARASOTA, FL 34243

TITLE V
NAME OLSSON, PEGGY ☐ Delete
STREET ADDRESS 6722 CARLYLE LANE
CITY-ST-ZIP SARASOTA, FL 34243

TITLE S
NAME PERNIGOTTI, THOMAS A ☐ Delete
STREET ADDRESS 6831 WHITFIELD INDUSTRIAL AVENUE, #F
CITY-ST-ZIP SARASOTA, FL 34243

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 1776 ALTA VISTA STREET
CITY-ST-ZIP SARASOTA, FL 34238

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-05

Date

941-753-5887

Daytime Phone #