


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT


**FILED**  
**Jan 30, 2004 8:00 am**  
**Secretary of State**

01-30-2004 90069 011 \*\*\*150.00

000000000000 P00000022644 1. Entity Name <b>KENNEY &amp; PARTNERS INC.</b>	
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Principal Place of Business <b>8110 CLEARY BLVD VILLA 1107 PLANTATION, FL 33324</b>	Mailing Address <b>8110 CLEARY BLVD VILLA 1107 PLANTATION, FL 33324</b>
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**DO NOT WRITE IN THIS SPACE**

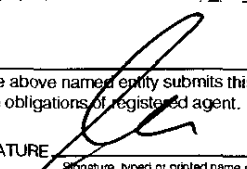
 01072004 000000 000000000000	
4. FEI Number <b>65-0985610</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b>	

6. Name and Address of Current Registered Agent

**KENNEY, GLENN D  
8110 CLEARY BLVD VILLA 1107  
PLANTATION, FL 33324**

**DO NOT WRITE IN THIS SPACE**

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:  DATE: **1-23-04**

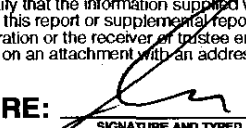
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>KENNEY, GLENN D</b> <b>8110 CLEARY BLVD VILLA 1107</b> <b>PLANTATION, FL 33324</b>
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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:  DATE: **1-23-04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR