

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 09, 2003 8:00 am
Secretary of State

06-09-2003 90113 022 ***150.00

DOCUMENT # P00000022644

1. Entity Name

KENNEY + PARTNERS Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8110 CLEARY BLVD Villa 1107

Suite, Apt. #, etc.

Villa 1107

City & State

PLANTATION FL

3. Mailing Address

8110 CLEARY BLVD

Suite, Apt. #, etc.

Villa 1107

City & State

PLANTATION FL

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0985610

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

GLENN D. KENNEY

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

8110 CLEARY BLVD Villa 1107

City

PLANTATION

FL

Zip Code

33324

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

5-31-03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**DIRECTOR
GLENN D KENNEY
8110 CLEARY BLVD Villa #1107
PLANTATION FL 33324**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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STREET ADDRESS

CITY-ST-ZIP

**DID NOT RECEIVE ORIGINAL
ADDRESS A1 LEFT IS NEW
AS OF 5-15-03 - PREVIOUS
ADDRESS WAS 1170 Hillsboro
mile #210
Hillsboro Beach FL 33062**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-31-03

Date

Daytime Phone #

CR2E034B (12/02)