


2005 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jun 06, 2005 8:00 am
Secretary of State

05-10-2005 90118 023 ***150.00

DOCUMENT # P00000025062 1. Entity Name KESSLER HOLDING II, INC.	
--	---

Principal Place of Business 7380 SAND LAKE RD., STE. 120 ORLANDO, FL 32819	Mailing Address 7380 SAND LAKE RD., STE. 120 ORLANDO, FL 32819
--	--

66021650



01112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3599165	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. 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 _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DCPT KESSLER, RICHARD C 7380 SAND LAKE RD STE 120 ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S KESSLER, MARTHA W 7380 SAND LAKE RD STE 120 ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VS DANTZLER, DAY B 7380 SAND LAKE RD STE 120 ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY- ST- ZIP	AS FLOTZ, JOSEPH B 5 PIEDMONT CENTER STE 750 ATLANTA, GA 30305
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

DO NOT WRITE IN THIS SPACE

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

4/30/05 (407) 996-9999
Date Daytime Phone #