2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P00000028865

1. Entity Name

K.M. BURGESS, INC.



FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90216 010 ***150.00

Principal Place of Business Mailing Address 1475 MALLARD LANDING BLVD. 1475 MALLARD LANDING BLVD. JACKSONVILLE FL 32259 JACKSONVILLE FL 32259			
The state of the s	141 40 141 41 41 414		
2. Principal Place of Business 3. Mailing Address)))		111 8 7 1 111 1 31 1
Suite, Apt. #, etc. Suite, Apt. #, etc.	IF MAKING C	CHANGES	
City & State City & State 4. FEI Number 59-3632088			plied For t Applicable
Zip Country Zip Country 5. Certificate of Status Desired	F	8.75 Add ee Required	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name 2. Nam	legistered Ag	ent	
BURGESS, KAREN M			
1475 MALLARD LANDING BLVD.	e) 		
JACKSONVILLE FL 32259			
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 Flo the obligations of registered agent.	orida. I am fan	niliar with, a	and accept
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, 2003 Fee will be \$550.00 Trust Fund Contribution Trust Fund Contribution		\$5.00	May Be
Make Uneck Payable to Piorida Department of State		Added	to Fees
Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFI			to Fees
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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 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: