

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081543

FILED
Jul 11, 2005
Secretary of State

Entity Name: KUSTOM KITCHEN DESIGNS, INC.

Current Principal Place of Business:

1177 PARK AVE, SUITE 8
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

1177 PARK AVE, SUITE 8
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-3661364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKERT, LINDA R
4545 SAPPHO AVENUE
JACKSONVILLE, FL 32205 US

Name and Address of New Registered Agent:

HARDEE, GREG V
1177 PARK AVE
SUITE 8
ORANGE PARK, FL 32073 US

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.

SIGNATURE: GREG HARDEE

07/11/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KIRKLAND, JARED O
Address: COUNTY RD 125 N
City-St-Zip: GLEN ST MARY, FL 32040

Title: D (X) Delete
Name: MARKERT, LINDA R
Address: 4545 SAPPHO AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: D () Delete
Name: WILLINGER, PAUL L
Address: 7732 KNOLL DR S
City-St-Zip: JACKSONVILLE, FL 32221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JARED KIRKLAND

D

07/11/2005

Electronic Signature of Signing Officer or Director

Date