

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000045979	
1. Entity Name AK INVESTMENT MANAGEMENT, INC.	
Principal Place of Business 5080 NORTH OCEAN DRIVE SUITE #19A SINGER ISLAND, FL 33404-2647	Mailing Address 5080 NORTH OCEAN DRIVE SUITE #19A SINGER ISLAND, FL 33404-2647



04122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1113235	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PILOTTE, FRANK T
340 ROYAL PALM WAY
SUITE 100
PALM BEACH, FL 33480

**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 _____
Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent Signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ANDERSON, EVELYN M
STREET ADDRESS	5080 NORTH OCEAN DRIVE #19A
CITY-ST-ZIP	SINGER ISLAND, FL 334042647

TITLE	D
NAME	ANDERSON, WAYNE R
STREET ADDRESS	10240 ALLAMANDA CIRCLE
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418

TITLE	D
NAME	KENNEDY, WENDY S
STREET ADDRESS	172 CYPRESS TRACE
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/21/05-80075-017 150.00

**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)(f), 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: Wendy Kennedy Wendy Kennedy 4/18/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #