

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051541

Entity Name: KMC CORPORATION

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

6601 LYONS RD
E7
COCONUT CREEK, FL 33073

Current Mailing Address:

6601 LYONS RD
E7
COCONUT CREEK, FL 33073

New Principal Place of Business:

20 SW 27TH AVENUE
SUITE 300
POMPANO BEACH, FL 33069

New Mailing Address:

20 SW 27TH AVENUE
SUITE 300
POMPANO BEACH, FL 33069

FEI Number: 65-1102491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINGER, RONALD
6601 LYONS RD
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

FINGER, RONALD
20 SW 27TH AVENUE
SUITE 300
POMPANO BEACH, FL 33069 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: RONALD FINGER

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FINGER, RONALD
Address: 6601 LYONS RD
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP () Delete
Name: NOIK, JULIAN
Address: 6601 LYONS RD
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP () Delete
Name: STAMBAUGH, TROY R
Address: 122 VIA SANTA CRUZ
City-St-Zip: JUPITER, FL 33458

Title: VP () Delete
Name: FINGER, DYLAN S
Address: 18592 OCEAN MIST DR
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FINGER, RONALD
Address: 20906 HAMACA COURT
City-St-Zip: BOCA RATON, FL 33433

Title: VP (X) Change () Addition
Name: NOIK, JULIAN
Address: 23349 DRAYTON DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: VP (X) Change () Addition
Name: STAMBAUGH, TROY R
Address: 11461 SW WALDORF CT
City-St-Zip: PORT ST. LUCIE, FL 34987

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RONALD FINGER

MGRM

01/14/2009

Electronic Signature of Signing Officer or Director

Date