

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000053931

FILED  
Apr 29, 2003  
Secretary of State

Entity Name: KAM VENTURES, INC.

**Current Principal Place of Business:**

1002 OAK FOREST DRIVE  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

1002 OAK FOREST DRIVE  
NAPLES, FL 34104 US

**New Mailing Address:**

FEI Number: 59-3730743

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCCAUSLAND, FRANCINE  
1002 OAK FOREST DRIVE  
NAPLES, FL 34104 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCCAUSLAND, FRANCINE  
Address: 1002 OAK FOREST DRIVE  
City-St-Zip: NAPLES, FL 34104 US

Title: V ( ) Delete  
Name: KENT, LYNDA  
Address: 460 19TH STREET NW  
City-St-Zip: NAPLES, FL 34120 US

Title: S ( ) Delete  
Name: ALLEN, LISA M  
Address: 1401 NW 66TH TERRACE  
City-St-Zip: KANSAS CITY, MO 64118 US

**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: FRANCINE MCCAUSLAND

P

04/29/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date