

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000057785

Entity Name: MARK KENYON, INC.

FILED
Mar 11, 2006
Secretary of State

Current Principal Place of Business:

9815 HILLTOP DR
NEW PORT RICHEY, FL 346543461

New Principal Place of Business:

9935 LAKEVIEW DRIVE
NEW PORT RICHEY, FL 34654

Current Mailing Address:

9815 HILLTOP DR
NEW PORT RICHEY, FL 346543461

New Mailing Address:

9935 LAKEVIEW DRIVE
NEW PORT RICHEY, FL 34654

FEI Number: 59-3724447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENYON, MARK
9815 HILLTOP DR
NEW PORT RICHEY, FL 346543461 US

Name and Address of New Registered Agent:

KENYON, MARK
9935 LAKEVIEW DRIVE
NEW PORT RICHEY, FL 34654 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:

03/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KENYON, MARK
Address: 9815 HILLTOP DR
City-St-Zip: NEW PORT RICHEY, FL 346543461

Title: VST () Delete
Name: KENYON, JOANNE
Address: 9815 HILLTOP DR
City-St-Zip: NEW PORT RICHEY, FL 346543461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KENYON, MARK
Address: 9935 LAKEVIEW DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VST (X) Change () Addition
Name: KENYON, JOANNE
Address: 9935 LAKEVIEW DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

I hereby certify that the information supplied with this filing does not qualify for the 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: JOANNE KENYON

VST

03/11/2006

Electronic Signature of Signing Officer or Director

Date