

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2005 8:00 am**  
**Secretary of State**

05-05-2005 90087 011 \*\*\*150.00

<b>DOCUMENT # P01000069134</b> 1. Entity Name <b>KAYLEY CORPORATION</b>			
Principal Place of Business <b>76 SOUTH LAURA STREET SUITE 1703 JACKSONVILLE, FL 32202</b>		Mailing Address <b>76 SOUTH LAURA STREET SUITE 1703 JACKSONVILLE, FL 32202</b>	
2. Principal Place of Business <b>6817 SOUTHPOINT PKWY # 1804 JACKSONVILLE, FL 32216 US</b>		3. Mailing Address <b>6817 SOUTHPOINT PKWY # 1804 JACKSONVILLE, FL 32216 US</b>	
4. FEI Number <b>75-2979416</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>BREW, GEORGE K 76 SOUTH LAURA STREET SUITE 1703 JACKSONVILLE, FL 32202</b>		7. Name and Address of New Registered Agent Name <b>WARREN G. BREW</b> Street Address (P.O. Box Number is Not Acceptable) <b>6817 SOUTHPOINT PKWY # 1804</b> City <b>JACKSONVILLE</b> FL Zip Code <b>32216</b>	
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 <u>WARREN G. BREW</u> <b>WARREN G. BREW</b> <b>5-7-05</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <b>D</b> <input type="checkbox"/> Delete NAME <b>BREW, GEORGE K</b> STREET ADDRESS <b>76 SOUTH LAURA STREET</b> CITY-ST-ZIP <b>JACKSONVILLE, FL 32202</b>	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME <b>6817 SOUTHPOINT PKWY</b> STREET ADDRESS <b># 1804</b> CITY-ST-ZIP <b>JACKSONVILLE, FL 32216</b>		
TITLE <b>P</b> <input type="checkbox"/> Delete NAME <b>BREW, WARREN G</b> STREET ADDRESS <b>201 SAILFISH DR, E.</b> CITY-ST-ZIP <b>ATLANTIC BEACH, FL 32233</b>	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME <b>6817 SOUTHPOINT PKWY</b> STREET ADDRESS <b># 1804</b> CITY-ST-ZIP <b>JACKSONVILLE, FL 32216</b>		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>WARREN G. BREW</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>5-7-05</b> <b>904-354-4741</b> <small>Date Daytime Phone #</small>	