2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2009
Secretary of State

DOCUMENT# P01000081923

Entity Name: KENYON & PARTNERS, INC.

Current Principal Place of Business:

3203 QUEEN PALM DR
TAMPA, FL 33619

New Principal Place of Business:

3203 QUEEN PALM DR
TAMPA, FL 33619 US

Current Mailing Address:

3203 QUEEN PALM DR
TAMPA, FL 33619

New Mailing Address:

3203 QUEEN PALM DR
TAMPA, FL 33619 US

FEI Number: 59-3742046 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KENYON, DEAN S
5002 WEST KNIGHTS GRIFFIN ROAD
PLANT CITY, FL 33565 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: KENYON, DEAN
Address: 5002 W. KNIGHTS GRIFFIN RD
City-St-Zip: PLANT CITY, FL 33565

Title: VP ( ) Delete
Name: HANSEN, TEDDY S SR
Address: 9410 WOODBAY DR
City-St-Zip: TAMPA, FL 33626 US

Title: VP ( ) Delete
Name: BRACE, BUDWIN B
Address: 8417 KENTON RD
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: DIR ( ) Delete
Name: JEFFREY, SHAWN M
Address: 15922 EAGLE RIVER WAY
City-St-Zip: TAMPA, FL 33624 US

Title: DIR ( ) Delete
Name: DILPORT, HENRY
Address: P.O.BOX1873
City-St-Zip: BRANDON, FL 33509 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KENYON, DEAN
Address: 5002 W. KNIGHTS GRIFFIN RD
City-St-Zip: PLANT CITY, FL 33565 US

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

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 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: DEAN S KENYON PRES 03/03/2009
Electronic Signature of Signing Officer or Director Date