FILED
May 07, 2003 8:00 am
Secretary of State
05-07-2003 90137 019 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

80115032

DOCUMENT # P01000091668

1. Entity Name
LAW OFFICES OF KELLIE J. KILLEBREW, P.A.

Principal Place of Business	Mailing Address
420 W INDIANTOWN RD JUPITER, FL 33458	14725 92 CT N WEST PALM BEACH, FL 33412

2. Principal Place of Business	3. Mailing Address
14725 92ND	14725 92ND CT.
Suite, Apt. #, etc. CT. N.	Suite, Apt. #, etc. N.
City & State West Palm Bch FL	City & State West Palm Bch FL
Zip 33412 Country USA	Zip 33412 Country USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1140295 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
KILLEBREW, KELLIE J
420 W INDIANTOWN RD
JUPITER, FL 33458

7. Name and Address of New Registered Agent
Name Killebrew, Kellie J
Street Address (P.O. Box Number is Not Acceptable) 14725 92ND CT. N
City West Palm Bch. FL Zip Code 33412

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 [signature] 4/30/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KILLEBREW, KELLIE J 420 INDIANTOWN RD JUPITER, FL 33458	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres. Kellie Killebrew 14725 92ND CT. N West Palm Bch, FL 33412	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (10/02)

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: Kellie J. Killebrew [signature], Pres 4/30/03 561-845-3414
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #