

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000120821

Entity Name: K-C MANAGEMENT OF IBIS, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

8973 LAKES BLVD.
WEST PALM BEACH, FL 33412

New Principal Place of Business:

Current Mailing Address:

8973 LAKES BLVD.
WEST PALM BEACH, FL 33412

New Mailing Address:

FEI Number: 01-0572677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLSAPS, KENNETH E
8973 LAKES BLVD.
WEST PALM BEACH, FL 33412 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: D/P () Delete
Name: MILLSAPS, KENNETH E
Address: 8973 LAKES BLVD.
City-St-Zip: WEST PALM BEACH, FL 33412

Title: V/D () Delete
Name: KEAVY, CHRISTINA L
Address: 13020 154TH PLACE NORTH
City-St-Zip: JUPITER, FL 33478

Title: V/D () Delete
Name: KEAVY, MICHAEL
Address: 13020 154TH PLACE NORTH
City-St-Zip: JUPITER, FL 33478

Title: S/D () Delete
Name: MILLSAPS, CAROLYN G
Address: 8973 LAKES BLVD
City-St-Zip: WEST PALM BEACH, FL 33412

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:

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: KENNETH E. MILLSAPS

D/P

04/28/2008

Electronic Signature of Signing Officer or Director

Date