## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P02000045429 1. Entity Name

KD ENTERPRISES, INC. OF LAKELAND

Principal Place of Business

1634 SHERWOOD LAKES BLVD LAKELAND, FL 33809 Mailing Address

1634 SHERWOOD LAKES BLVD LAKELAND, FL 33809

## FILED Apr 12, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03112004	No Chg-P	CR2E034 (10	CR2E034 (10/03)		
4. FEI Number			Applied For		
50-7429	560	Γ	Not Applicable		

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVID K OAKS PA 407 E MARION AVE STE 101 PUNTA GORDA, FL 33950

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the $\varrho$ ions of registered agent.	ourpose of changing its registere	d office or re	agistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable, (NOTE, Registered	i Agent signature	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 9. Election Campaign I		Election Campaign Finan     Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS		1 4, ,		
TITLE NAME STREET ADDRESS CITY-SJ-ZIP	PD HENEGAR, KAREN L 1634 SHERWOOD LAKES BLVD LAKELAND, FL 33809	-			U00000109006	
title Name Street address City-St-Zip	STD GARDIS, DEBRA A 1634 SHERWOOD LAKES BLVD LAKELAND, FL 33809				04/12/04-80026-006 150.00	
title Name Street address City-St-Zip				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-LIP				IN .	THIS SPACE	
TITLE NAME STREET ADORESS CRY-SI-ZIP						
TIFLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling 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 gither like empowered.						