


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2004 8:00 am
Secretary of State

07-21-2004 90026 014 ***150.00

DOCUMENT # P02000077977 1. Entity Name KNS, INC.					
Principal Place of Business 1819 MAIN ST STE 610 SARASOTA, FL 34236			Mailing Address 1819 MAIN ST STE 610 SARASOTA, FL 34236		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 54-2065390	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent NORTON, SAM D 1819 MAIN ST STE 610 SARASOTA, FL 34236				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D NORTON, SAM D <input type="checkbox"/> Delete 1819 MAIN ST STE 610 SARASOTA, FL 34236		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LISZEWSKI, KENNETH <input type="checkbox"/> Delete 1819 MAIN ST STE 610 SARASOTA, FL 34236		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MELONE, NICK <input type="checkbox"/> Delete 1819 MAIN ST STE 610 SARASOTA, FL 34236		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: _____			2/15/04 Date Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

44049187



07132004 Chg-P CR2E034 (10/03)

Attachment
44049187
P02000077977

KNS, INC.
1819 Main Street, Suite 610
Sarasota, FL 34236

July 15, 2004

Florida Department of State
Division of Corporations
Uniform Business Report
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: 2004 Uniform Business Report

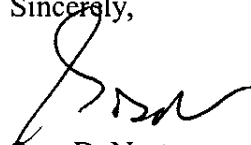
Dear Sir/Madam:

I recently discovered that the 2004 Uniform Business Report for KNS, Inc. was not timely filed. I do not recall receiving my 2004 Uniform Business Report from the Florida Department of State. Please check your records to confirm that the corporation's correct address is as listed above.

In addition, I am also respectfully requesting that the Department of State waive the \$400.00 penalty for my failing to file my corporation's Uniform Business Report by May 1, 2004. I have enclosed for filing my corporation's 2004 Uniform Business Report along with a check made payable to the Florida Department of State for \$150.00.

As always, thank you for your assistance with this matter. If you have any questions, please do not hesitate to contact me at (941) 954-4691.

Sincerely,



Sam D. Norton