

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080822

FILED  
Apr 24, 2005  
Secretary of State

Entity Name: SATIN KENNEL INC

**Current Principal Place of Business:**

PO BOX 104  
1530 STEVENS LOOP  
BABON PARK, FL 33827

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 104  
1530 STEVENS LOOP  
BABSON PARK, FL 33827

**New Mailing Address:**

FEI Number: 16-1619419      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CRAWFORD, ROBERT M  
PO BOX 104  
1530 STEVENS LOOP  
BABSON PARK, FL 338227 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: DVP ( ) Delete  
Name: BURKHART, JEFFREY J  
Address: 4309 SW 17TH TERR  
City-St-Zip: TOPEKA, KS 66604

Title: DP ( ) Delete  
Name: CRAWFORD, ROBERT M  
Address: 7100 ULMERTON, #332  
City-St-Zip: LARGO, FL 33771

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DP (X) Change ( ) Addition  
Name: CRAWFORD, ROBERT M  
Address: PO BOX 104  
City-St-Zip: BABSON PARK, FL 33827

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT M CRAWFORD

PRES

04/24/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date