

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080822

FILED
Feb 27, 2006
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:

100 BENOIST FARM ROAD
WEST PALM BEACH, FL 33411

Current Mailing Address:

PO BOX 104
1530 STEVENS LOOP
BABSON PARK, FL 33827

New Mailing Address:

94 COTTAGEWOOD DRIVE
SAFETY HARBOR, FL 34695

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:

CRAWFORD, SHIRLEY M
94 COTTAGEWOOD DRIVE
SAFETY HARBOR, FL 34695 US

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: SHIRLEY M CRAWFORD

02/27/2006

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: PO BOX 104
City-St-Zip: BABSON PARK, FL 33827

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change () Addition
Name: CRAWFORD, ROBERT M
Address: 94 COTTAGEWOOD DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695

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

PRES

02/27/2006

Electronic Signature of Signing Officer or Director

Date