

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90675 013 ***150.00

DOCUMENT # P03000009119

1. Entity Name

KEVIN CHANEY CONSTRUCTION INC.



Principal Place of Business

1107 KEY PLAZA PMB 152
KEY WEST FL 33040

Mailing Address

1107 KEY PLAZA PMB 152
KEY WEST FL 33040

2. Principal Place of Business

5970 PENINSULAR AVE

3. Mailing Address

1107 KEY PLAZA 152

Suite, Apt. #, etc.

#5

Suite, Apt. #, etc.

City & State

City & State

KEY WEST FL

Zip

33040

Country

MONROE

Zip

33040

Country

MONROE

4. FEI Number

81-0605701

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.
941 FOURTH ST.
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name GRACE CHANEY

Street Address (P.O. Box Number is Not Acceptable)

5970 PENINSULAR AVE #5

City KEY WEST

FL

Zip Code 33040

I, 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

Grace L. Chaney - Treasurer

4-10-04

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D
NAME CHANEY, KEVIN J
STREET ADDRESS 1107 KEY PLAZA PMB 152
CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete

TITLE D
NAME CHANEY, GRACE L
STREET ADDRESS 1107 KEY PLAZA PMB 152
CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KEVIN CHANEY

4-10-04

Date

305-294-7509

Daytime Phone #