

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90205 037 ***150.00

DOCUMENT # P03000016536

1. Entity Name

K & S CUSTOM FRAMING, INC.



Principal Place of Business

39 FORDHAM LANE
PALM COAST FL 32137

Mailing Address

39 FORDHAM LANE
PALM COAST FL 32137

2. Principal Place of Business

16 EASTMAN LANE

Suite, Apt. #, etc.

3. Mailing Address

16 EASTMAN LANE

Suite, Apt. #, etc.

City & State

PALM COAST FL

City & State

PALM COAST FL

Zip

32164

Country

Flagler

Zip

32164

Country

Flagler

4. FEI Number

05-0560982

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCDERMOTT, KATHLEEN
39 FORDHAM LANE
PALM COAST FL 32137

7. Name and Address of New Registered Agent

Name McDermott, Kathleen

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

16 EASTMAN LANE

City PALM COAST

FL

Zip Code

32164

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

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 PT ☐ Delete
NAME MCDERMOTT, KATHLEEN
STREET ADDRESS 39 FORDHAM LANE
CITY-ST-ZIP PALM COAST FL 32137

TITLE V ☐ Delete
NAME HARMENING, TERRY
STREET ADDRESS 39 FORDHAM LANE
CITY-ST-ZIP PALM COAST FL 32137

TITLE S ☐ Delete
NAME EMPLIT, CHRIS
STREET ADDRESS 39 FORDHAM LANE
CITY-ST-ZIP PALM COAST FL 32137

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PT ☒ Change ☐ Addition
NAME MCDERMOTT, KATHLEEN
STREET ADDRESS 16 EASTMAN LANE
CITY-ST-ZIP PALM COAST FL 32164

TITLE V ☒ Change ☐ Addition
NAME HARMENING, TERRY
STREET ADDRESS 1617 NORTH DAYTONA AVE.
CITY-ST-ZIP FLAGLER BEACH FL 32168

TITLE S ☒ Change ☐ Addition
NAME EMPLIT, CHRIS
STREET ADDRESS 54 LANGDON DRIVE
CITY-ST-ZIP PALM COAST FL 32137

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

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

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

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:

Kathleen McDermott

Kathleen McDermott

Date

Daytime Phone #

386

4/26/04 437-8183