

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 08, 2006 8:00 am**  
**Secretary of State**

03-08-2006 90163 025 \*\*\*150.00

<b>DOCUMENT # P03000065059</b> 1. Entity Name <b>"K" MANAGEMENT CO. INC.</b>			
Principal Place of Business <b>12593 SPRING HILL DR. SPRING HILL, FL 34609</b>		Mailing Address <b>12593 SPRING HILL DR. SPRING HILL, FL 34609</b>	
2. Principal Place of Business <b>2217 Pinta Ave.</b> Suite, Apt. #, etc.		3. Mailing Address <b>2217 Pinta Ave.</b> Suite, Apt. #, etc.	
City & State <b>Spring Hill, FL</b> Zip Country <b>34609 USA</b>		City & State <b>Spring Hill, FL</b> Zip Country <b>34609 USA</b>	
4. FEI Number <b>54-2114360</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		6. Name and Address of Current Registered Agent <b>FONZO, FRANK 12593 SPRING HILL DR. SPRING HILL, FL 34609</b>	
7. Name and Address of New Registered Agent Name <b>Lori Morrison</b> Street Address (P.O. Box Number is Not Acceptable) <b>2217 Pinta Ave.</b> City <b>Spring Hill</b> <b>FL</b> Zip Code <b>34609</b>		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>FONZO, FRANK</b> <b>12593 SPRING HILL DR. SPRING HILL, FL 34609</b> <input checked="" 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	D <b>MORRISON, LORI</b> <b>12593 SPRING HILL DR. SPRING HILL, FL 34609</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S/T</b> <input checked="" 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	<b>P</b> <b>Kevin Fonzo</b> <b>2401 Edgewater Dr.</b> <b>Orlando, FL 32804</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>Steve Fonzo</b> <b>643 Peterson Lake Rd.</b> <b>Collierville, TN 38017</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>Steve Fonzo Greg Fonzo</b> <b>2401 Edgewater Dr.</b> <b>Orlando, FL 32804</b> <input type="checkbox"/> Change <input checked="" 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 exemptions contained 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 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.			
<b>SIGNATURE:</b> <i>Lori A Morrison</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>1/15/06 (352)584-9957</b> <small>Date Daytime Phone #</small>	