


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 19, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000073962</b> 1. Entity Name KERALA COUNTRY CLUB, INC.	
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Principal Place of Business 6953 NW 19TH STREET MARGATE, FL 33063	Mailing Address 6953 NW 19TH STREET MARGATE, FL 33063
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**DO NOT WRITE IN THIS SPACE**



02142005 No Chg-P CR2E034 (10/03)

4. FEI Number 06-1702226	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  KUNCHANDY, GEORGE 6953 NW 19TH STREET MARGATE, FL 33063	<b>DO NOT WRITE IN THIS SPACE</b>
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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: George Kunchandy President. 2/15/05  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KUNCHANDY, GEORGE 6953 NW 19TH STREET MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KUNCHANDY, GEORGE 6953 NW 19TH STREET MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC KUNCHANDY, GEORGE 6953 NW 19TH STREET MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES KUNCHANDY, GEORGE 6953 NW 19TH STREET MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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**DO NOT WRITE  
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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: George Kunchandy GEORGE KUNCHANDY 2/15/05 (954) 979-2640  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #