

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000090810

Entity Name: KITTY HAWK PROPERTIES, INC.

**FILED**  
**Jun 10, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

725 SE PORT ST LUCIE BLVD  
SUITE 201  
PORT ST LUCIE, FL 34984

## **Current Mailing Address:**

10380 SW VILLAGE CENTER DR  
# 110  
PORT ST LUCIE, FL 34987

## **New Principal Place of Business:**

10440 SW STEPHANIE WAY  
210  
PORT ST LUCIE, FL 34987

## **New Mailing Address:**

10440 SW STEPHANIE WAY  
210  
PORT ST LUCIE, FL 34987

FEI Number: 61-1455974

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

TOLER, CALVIN H II  
10440 SW STEPHANIE WAY  
# 210  
PORT ST LUCIE, FL 34987 US

## **Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: P, S ( ) Delete  
Name: TOLER, CALVIN H II  
Address: 10440 SW STEPHANIE WAY  
City-St-Zip: # 210, FL 34987

Title: V, T (X) Delete  
Name: TOLER, CALVIN K  
Address: 11221 CRESCENT BAY BLVD  
City-St-Zip: CLERMONT, FL 34711

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify 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: CALVIN TOLER

P

06/10/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date