

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091068

Entity Name: KCLS SPENCER, INC.

FILED  
Apr 26, 2006  
Secretary of State

**Current Principal Place of Business:**

319 KENT DRIVE  
COCOA BEACH, FL 32931

**New Principal Place of Business:**

**Current Mailing Address:**

319 KENT DRIVE  
COCOA BEACH, FL 32931

**New Mailing Address:**

FEI Number: 20-0763962

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPENCER, RAYMOND S  
319 KENT DRIVE  
COCOA BEACH, FL 32931 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SPENCER, RAYMOND S  
Address: 319 KENT DRIVE  
City-St-Zip: COCOA BEACH, FL 32931 US

Title: V ( ) Delete  
Name: ESTEVES, CARLOS DARIO  
Address: POST OFFICE BOX 617  
City-St-Zip: CAPE CANAVERAL, FL 32920

**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 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: RAYMOND SCOTT SPENCER

MR

04/26/2006

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

\_\_\_\_\_  
Date