

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2004 8:00 am
Secretary of State

05-03-2004 90436 024 ***150.00

DOCUMENT # P03000141856					
1. Entity Name KEN ELLIS CORPORATION					
Principal Place of Business 11946 COLBY CREEK DRIVE JACKSONVILLE, FL 32258			Mailing Address 11946 COLBY CREEK DRIVE JACKSONVILLE, FL 32258		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 41-2117879	
5. Name and Address of Current Registered Agent ELLIS, KENNETH 11946 COLBY CREEK DRIVE JACKSONVILLE, FL 32258				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 resigning) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELLIS, KENNETH 11946 COLBY CREEK DRIVE JACKSONVILLE, FL 32258		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition	
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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)(f), 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 807, 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: <u>Kenneth Ellis</u> KENNETH ELLIS 4-27-04 904-880-4161					

66425156



04272004 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

8. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

FL Zip Code

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9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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SIGNATURE: Kenneth Ellis **KENNETH ELLIS** **4-27-04** **904-880-4161**