

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90297 003 ***158.75

DOCUMENT # P03000147060

1. Entity Name

KELLY BROTHERS FLOORING, INC.



Principal Place of Business

**19121 HIGHWAY 331 SOUTH
FREEPORT FL 32439**

Mailing Address

**P O BOX 112
VERNON FL 32462**

24061848



MOORE CR2E034 (11/03)

2. Principal Place of Business

Same

3. Mailing Address

19121 HWY 331 SOUTH

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FREEPORT, FL

4. FEI Number

20-0450656

Applied For

Not Applicable

Zip

Country

32439

Country

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KELLY, KEITH
19121 HWY 331 S
FREEPORT FL 32439**

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

**P
KELLY, KEITH
19121 HWY 331 S
FREEPORT FL 32439**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

**VP
KELLY, KEITH
19121 HWY 331 S
FREEPORT FL 32439**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

**S
KELLY, KEITH
19121 HWY 331 S
FREEPORT FL 32439**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

**T
KELLY, KEITH
19121 HWY 331 S
FREEPORT FL 32439**

TITLE ☐ 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)(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:

X Kelly Kelly

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

X 5/20/04

Daytime Phone #

**850 830-0490
X 850 835-1827**