## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000154228

Entity Name: KELLEY HADDEN, INC.

FILED Apr 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15739 IONA LAKES DRIVE #30 6089 POMPANO STREET FORT MYERS, FL 33908 FORT MYERS, FL 33919 US

Current Mailing Address: New Mailing Address:

15739 IONA LAKES DRIVE #30 6089 POMPANO STREET FORT MYERS, FL 33908 FORT MYERS, FL 33919 US

FEI Number: 59-3774780 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HADDEN, KELLEY
15739 IONA LAKES DRIVE #30
FORT MYERS, FL 33908 US
HADDEN, KELLEY
6089 POMPANO STREET
FORT MYERS, FL 33919 US

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: 04/02/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PST () Delete
 Title:
 PST (X) Change () Addition

 Name:
 HADDEN, KELLEY
 Name:
 HADDEN, KELLEY

 Address:
 15739 IONA LAKES DRIVE #30
 Address:
 6089 POMPANO STREET

City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: FORT MYERS, FL 33919

Title: VD Title: VD (X) Change ( ) Addition () Delete Name: HADDEN, KELLEY Name: HADDEN, KELLEY 15739 IONA LAKES DRIVE #30 Address: 6089 POMPANO STREET Address: FORT MYERS, FL 33908 FORT MYERS, FL 33919 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KELLEY HADDEN PST 04/02/2005