

2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

09-30-2004 90011 015 ***150.00

DOCUMENT # P03000155194

1. Entity Name
KERRY FLOOD, INC.



Principal Place of Business
**711 STARKE LK CIRCLE
OCOE, FL 34761**

Mailing Address
**711 STARKE LK CIRCLE
OCOE, FL 34761**

54073646



2. Principal Place of Business

711 Starke Lk Cir
Suite, Apt. #, etc.

3. Mailing Address

711 Starke Lk Cir
Suite, Apt. #, etc.

09232004

Chg-P

CR2E034 (10/03)

City & State

ocoe Florida

City & State

ocoe Florida

4. FEI Number

200539203

Applied For

Not Applicable

Zip
34761

Country

USA

Zip

34761

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**FLOOD, KERRY
711 STARKE LK CIRCLE
OCOE, FL 34761**

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

Kerry Flood

(NOTE: Registered Agent signature not valid when reinstating)

DATE

9-22-04

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	FLOOD, KERRY	
STREET ADDRESS	711 STARKE LK CIRCLE	
CITY-ST-ZIP	OCOE, FL 34761	
TITLE	V	<input type="checkbox"/> Delete
NAME	CORRELL, ANDREAS	
STREET ADDRESS	711 STARKE LK CIRCLE	
CITY-ST-ZIP	OCOE, FL 34761	
TITLE	V	<input type="checkbox"/> Delete
NAME	PINTER, CAROL	
STREET ADDRESS	5400 FITNERS CIRCLE	
CITY-ST-ZIP	ORLANDO, FL 32839	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

Kerry Flood

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-22-04

407-438-0912

Daytime Phone #