


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90106 002 *****8.75
02-07-2005 90106 001 ***150.00

DOCUMENT # P04000038567 1. Entity Name K & C SEALY, INC.					
Principal Place of Business 632 HERBERT STREET PORT ORANGE, FL 32129 US			Mailing Address 121 TROPIC BIRD COURT DAYTONA BEACH, FL 32119 US		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address 632 Herbert St Port Orange FL 32129 Suite, Apt. #, etc. City & State Zip			
Country Volusia		4. FEI Number 77062 5254 Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent SEALY, CHRISTINE 121 TROPIC BIRD COURT DAYTONA BEACH, FL 32119			7. Name and Address of New Registered Agent Name Sealy, Christine Street Address (P.O. Box Number is Not Acceptable) 634 Herbert St Port Orange, FL 32129 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 <u><i>Christine Sealy</i></u> DATE <u><i>2/2/05</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	P SEALY, CHRISTINE 121 TROPIC BIRD COURT DAYTONA BEACH, FL 32119 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	634 Herbert St Port Orange, FL 32129 <input type="checkbox"/> Change <input type="checkbox"/> 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: <u><i>Christine Sealy</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u><i>2/1/05</i></u> Daytime Phone # <u><i>386 767-6290</i></u>		