ANNUAL REPORT							-
DOCUMENT # P04000041381				00	\sim \sim \sim \sim	Λ.Ο.Α.	~ <i>//</i> ~
1. Entity Nam KENT PL	Entity Name ENT PLACE INVESTMENTS, INC.				AJuly	2007	D) 08:00 AM of State
					15 6	erevary	of State
Principal Place 5431 BROOI ORLANDO, F	KLINE DRIVE	Mailing Address 5431 BROOKLINE DRIVE ORLANDO, FL 32819					
	· · · · · · · · · · · · · · · · · · ·						
DO NOT WRITE IN THIS SPACE				07102007	No Chg-P	CR2E034 (11/0	5)
			CE	4. FEI Numb			Applied For
				20-084		\$8.75	Not Applicable Additional
	6. Name and Address of Current I	Registered Agent		5. Gerundate	of Status Desired	Fee Requ	
		Advisor Addit					T
PIERCE, PAGE 5431 BROOKLINE DRIVE			DO NOT WRITE				
ORLANDO, FL 32819				IN T	THIS SPA	ACE	
			**			200 N 1 1 1 2 2	
	named entity submits this statement for	the purpose of changing its register	ed office or register	ed agent, or bo	in, in the State of Flori	dø. I am familiar wi	th, and accept
the obligations of registered agent. U00001768672 SIGNATURE							100 00
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE, Registere	d Agent signeture required	when rounstating)			1 5U+1U
FILE NOWIII FEE IS \$150.00 Due by September 14, 2007 9. Election Campaign Finantiful Trust Fund Contribution.				00 May Be ed to Fees	in accordance will corporation did no	th s. 607.193(2)(i ot receive the pric	o), F.S., the or notice.
10.	OFFICERS AND I	DIRECTORS .					-
TITLE NAME	D PIERCE, PAGE						
STREET ADDRESS	5431 BROOKLINE DRIVE						
CITY-ST-ZIP	ORLANDO, FL 32819			٠	•		
NAME							
STREET ADDRESS CHY-ST-ZIP	<u>.</u> .						-14
ME				-			
name Street address				DΩ	NOT W	TIC	
CITY-ST-ZIP			-				-
rite Name				IN	THIS SPA	HCE	
STREET ADORESS CITY-ST-ZIP		1 %					
TITLE		·					
NAME STREET ADDRESS							
CITY-ST-ZIP	<u> </u>				-		
TITLE NAME							
STREET ADDRESS City-St-ZIP							
	certify that the information supplied with	this filling does not qualify for the exe	emptions contained	in Chapter 119), Florida Statutes. I fu	inher centify that the	e information
indicated of the cor changed	certify that the information supplied with on this report or supplemental report is poration or the receiver or fusible empo or on an attachment with ah address, w	yue and acadrate and that my signal vered to execute this report as requi rith all other like emplowered.	rure snall nave the steed by Chapter 607	ате regar епес , Florida Statute	A as a made under oa es; end that my name i	er, uract am an onto appears in Block 10	or Block 11 if
-		\mathcal{U}	7.	9-1-	<i>Δ</i> (λ -	82/	1908
SIGNATURE: SIGNATURE AND TYPED OR PRINTING-MANE OF SIGNING OFFICER ON DIRECTOR Date Dayling Pricing 1							