## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000043640

Title:

Name:

Address:

City-St-Zip:

TRE

WIMPY, KEVIN R

200 SE BIKINI DRIVE

LAKE CITY, FL 32025

() Delete

FILED Jan 28, 2005 Secretary of State

				,	
Entity Na	me: KEVIN W	IMPY ENTERPRISES, INC.			
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
Current	rincipai Piace	e or business:	New Principal Plac	e or business:	
	KINI DRIVE Y, FL 32025				
Current M	lailing Addres	ss:	New Mailing Addre	ss:	
	KINI DRIVE Y, FL 32025				
FEI Number	: 37-1486407	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
DEEGAN, TIMOTHY P 9200 NW 36TH PLACE SUITE A GAINESVILLE, FL 32606 US				WIMPY, KEVIN 200 SE BIKINI DRIVE LAKE CITY, FL 32025 US	
	named entity of Florida.	submits this statement for the p	urpose of changing its register	ed office or registered agent, or both,	
SIGNATURE: KEVIN WIMPY				01/28/2005	
	Electron	nic Signature of Registered Age	nt	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( WIMPY, KEVIN 200 SE BIKINI LAKE CITY, FL	DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( WIMPY, KEVIN 200 SE BIKINI LAKE CITY, FL	DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SEC ( ELWOOD, J. N 200 SE BIKINI LAKE CITY, FL	DRIVE		(X) Change ( ) Addition EVIN KINI DRIVE Y, FL 32025	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: KEVIN WIMPY P 01/28/2005

() Change () Addition