

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141235

Entity Name: K.I.S. MARKETING INC.

FILED  
Apr 11, 2005  
Secretary of State

## Current Principal Place of Business:

256 OAK AVE.  
NAPLES, FL 34108

## New Principal Place of Business:

4100 CORPORATE SQUARE  
SUITE 137  
NAPLES, FL 34104

## Current Mailing Address:

256 OAK AVE.  
NAPLES, FL 34108

## New Mailing Address:

4100 CORPORATE SQUARE  
SUITE 137  
NAPLES, FL 34104

FEI Number: 84-1658920

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REGISTERED AGENTS LEGAL SERVICES, INC.  
1333 NORTH DUVAL STREET  
TALLAHASSEE, FL 32303 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DAVENPORT, LUCIFER R  
Address: 256 OAK AVE.  
City-St-Zip: NAPLES, FL 34108

Title: VP ( ) Delete  
Name: DAVENPORT, LUCIFER R  
Address: 256 OAK AVE.  
City-St-Zip: NAPLES, FL 34108

Title: SEC ( ) Delete  
Name: DAVENPORT, LUCIFER R  
Address: 256 OAK AVE.  
City-St-Zip: NAPLES, FL 34108

Title: TRES ( ) Delete  
Name: DAVENPORT, LUCIFER R  
Address: 256 OAK AVE.  
City-St-Zip: NAPLES, FL 34108

Title: DIR ( ) Delete  
Name: DAVENPORT, LUCIFER R  
Address: 256 OAK AVE.  
City-St-Zip: NAPLES, FL 34108

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: WARNER, RYAN A  
Address: 4100 CORPORATE SQUARE SUITE 137  
City-St-Zip: NAPLES, FL 34104

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TRES (X) Change ( ) Addition  
Name: WARNER, RYAN A  
Address: 4100 CORPORATE SQUARE  
City-St-Zip: NAPLES, FL 34104

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: LUCIFER RAY DAVENPORT

PRES

04/11/2005

Electronic Signature of Signing Officer or Director

Date