

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000167888

Entity Name: KWSF, INC.

FILED  
Feb 21, 2005  
Secretary of State

## Current Principal Place of Business:

3119 S.W. 42ND AVE.  
PALM CITY, FL 34990

## New Principal Place of Business:

## Current Mailing Address:

3119 S.W. 42ND AVE.  
PALM CITY, FL 34990

## New Mailing Address:

FEI Number: 51-0534184

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FILINGS, INC.  
3732 N.W. 16TH ST.  
FT. LAUDERDALE, FL 33311 US

## Name and Address of New Registered Agent:

BERHOFF, BARRY  
3119 S.W. 42ND AVENUE  
PALM CITY, FL 34990 US

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: BARRY BERHOFF

02/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BERHOFF, BARRY  
Address: 3119 S.W. 42ND AVE.  
City-St-Zip: PALM CITY, FL 34990

Title: TD ( ) Delete  
Name: BERHOFF, LLOYD  
Address: 3119 S.W. 42ND AVE.  
City-St-Zip: PALM CITY, FL 34990

Title: SD ( ) Delete  
Name: BERHOFF, SUSAN  
Address: 3119 S.W. 42ND AVE.  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BARRY BERHOFF

PD

02/21/2005

Electronic Signature of Signing Officer or Director

Date