

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

112

FILED

2007 MAY -4 PM 4:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/16/07 01040 008 52.50



04192007 Chg-P CR2E034 (12/06)

DOCUMENT # P05000010136					
1. Entity Name KAY-COURT HOLDINGS, INC.					
Principal Place of Business 6792 HIGH GROVE DR LAKELAND, FL 33813			Mailing Address 6792 HIGH GROVE DR LAKELAND, FL 33813		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-2199269	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ARTMAN, STEPHEN H ESQ. 925 SOUTH FLORIDA AVENUE LAKELAND, FL 33803				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Amended AR is \$61.25		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	D GOFF, LARRY J JR. 6792 HIGH GROVE DR. LAKELAND, FL 33813	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	800103613458 05/31/07--01036--013 **8.75	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GOFF, BARBARA J 6792 HIGH GROVE DR. LAKELAND, FL 33813	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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>Barbara J Goff</u> <u>BARBARA JO GOFF</u> 4/30/07 863-999-8547					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

5/15/07

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ARTICLES OF CORRECTION

for

Kay-Court Holdings, Inc.

Name of Corporation as currently filed with the Florida Dept. of State

P05000010136

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

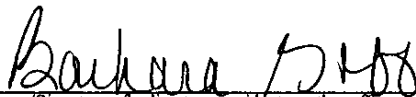
These articles of correction correct Annual Report,
(Document Type Being Corrected)

filed with the Department of State on 4/3/2007,
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Please change the officer/director status to Barbara Goff, VP, S, T
and Larry Goff to P.

Correct the inaccuracy, incorrect statement, or defect:



(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Barbara J. Goff

(Typed or printed name of person signing)

Director

(Title of person signing)

Filing Fee: \$35.00