

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014483

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: KINGSLEY INSURANCE AND FINANCIAL SERVICES, INC.

## Current Principal Place of Business:

5251 NW 113TH AVE  
CORAL SPRINGS, FL 33076

## New Principal Place of Business:

5335 NORTH MILITARY TRAIL  
SUITE 45  
WEST PALM BEACH, FL 33407

## Current Mailing Address:

5251 NW 113TH AVE  
CORAL SPRINGS, FL 33076

## New Mailing Address:

5335 NORTH MILITARY TRAIL  
SUITE 45  
WEST PALM BEACH, FL 33407

FEI Number: 20-2293122

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAINES, RAYANTHONY  
5251 NW 113TH AVE  
CORAL SPRINGS, FL 33076 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: CAINES, RAYANTHONY K  
Address: 5251 NW 113TH AVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: V ( ) Delete  
Name: CAINES, KIESHA J  
Address: 5251 NW 113TH AVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: T ( ) Delete  
Name: THEODORE, FADNER  
Address: 916 SW 15TH TERR #A  
City-St-Zip: FT LAUDERDALE, FL 33312

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition  
Name: CAINES, KIESHA J  
Address: 5251 NW 113TH AVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VP (X) Change ( ) Addition  
Name: THEODORE, FADNER  
Address: 19323 NW 86TH AVE  
City-St-Zip: HIALEAH, FL 33015

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: FADNER THEODORE

VP

04/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date