2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# P05000019311

Entity Name: UB ENTERTAINED KILLEARN, INC.

Current Principal Place of Business:

1439 S POMPANO PKWY STE 300
POMPANO BCH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1439 S POMPANO PKWY STE 300
POMPANO BCH, FL 33069

New Mailing Address:

FEI Number: 65-0276353 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UPCHURCH, JAMES R JR.
1439 S POMPANO PKWY STE 300
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

BELL, MICHAEL
1439 S POMPANO PKWY STE 300
POMPANO BEACH, FL 33069 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: MICHAEL BELL 03/18/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BELL, MICHAEL
Address: 1439 S POMPANO PKWY STE 300
City-St-Zip: POMPANO BCH, FL 33069

Title: VP (X) Delete
Name: UPCHURCH, JAMES ROGER JR
Address: 1439 S POMPANO PKWY STE 300
City-St-Zip: POMPANO BCH, FL 33069

Title: S (X) Delete
Name: GRIESEMER, MARY
Address: 1439 S POMPANO PKWY STE 300
City-St-Zip: POMPANO BCH, FL 33069

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 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: PAT RIEBLING ADM 03/18/2009
Electronic Signature of Signing Officer or Director Date