

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021427

Entity Name: KENWAY ST. LUCIE, INC.

FILED
Jan 06, 2011
Secretary of State

Current Principal Place of Business:

650 N. ROCK ROAD
FORT PIERCE, FL 34945

New Principal Place of Business:

Current Mailing Address:

P O BOX 2457
FORT PIERCE, FL 34954 US

New Mailing Address:

FEI Number: 20-2364422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWLER, MICHAEL D
240 N. PEACOCK BLVD., SUITE 102
PORT ST. LUCIE, FL 34986 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: SCOTT, WAYNE A
Address: P O BOX 2457
City-St-Zip: FORT PIERCE, FL 34954 US

Title: VP
Name: SCOTT, KENNETH T
Address: P O BOX 2457
City-St-Zip: FORT PIERCE, FL 34954 US

Title: SECR
Name: SCOTT, KENNETH T
Address: P O BOX 2457
City-St-Zip: FORT PIERCE, FL 34954 US

Title: TREA
Name: SCOTT, WAYNE A
Address: P O BOX 2457
City-St-Zip: FORT PIERCE, FL 34954

Title: DIR
Name: SCOTT, KENNETH T
Address: P O BOX 2457
City-St-Zip: FORT PIERCE, FL 34954

Title: DIR
Name: SCOTT, WAYNE A
Address: P O BOX 2457
City-St-Zip: FORT PIERCE, FL 34954

I hereby 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 all other like empowered.

SIGNATURE: KENNETH T. SCOTT

VPRE

01/06/2011

Electronic Signature of Signing Officer or Director

Date