

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032981

FILED  
Jan 12, 2006  
Secretary of State

Entity Name: K K V N INVESTMENTS INC

## Current Principal Place of Business:

1083 E HWY 329  
CITRA, FL 32113 US

## New Principal Place of Business:

## Current Mailing Address:

1083 E HWY 329  
CITRA, FL 32113 US

## New Mailing Address:

FEI Number: 20-2422329

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DREW, KAREN  
1083 E HWY 329  
CITRA, FL 32113 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 D ( ) Delete  
Name: DREW, KAREN  
Address: 1083 E HWY 329  
City-St-Zip: CITRA, FL 32113 US

Title: VP D ( ) Delete  
Name: CASTELLANO, VICKI J  
Address: 17107 SW 17TH CIRCLE  
City-St-Zip: OCALA, FL 34473 US

Title: T D ( ) Delete  
Name: DREW, KENNETH  
Address: 1083 E HWY 329  
City-St-Zip: CITRA, FL 32113 US

Title: S D ( ) Delete  
Name: CASTELLANO, NICK B  
Address: 17107 SW 17TH CIRCLE  
City-St-Zip: OCALA, FL 34473 US

## 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:

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 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: KAREN DREW

PD

01/12/2006

Electronic Signature of Signing Officer or Director

Date