2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 12, 2007 08:00 Al Secretary of State **DOCUMENT # P05000084483** 1. Entity Name **KENT ROSS INC** Mailing Address Principal Place of Business 6900-29 DANIELS PARKWAY 6900-29 DANIELS PARKWAY FT. MYERS, FL 33912 FT. MYERS, FL 33912 CR2E034 (11/05) 04092007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 68-0222259 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROSS, KENT E DO NOT WRITE 10450 WINE PALM 5721 IN THIS SPACE FT MYERS, FL 33912 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE U00000700866 ROSS, KENT E NAME 04/20/07-80033-016 150.00 STREET ADDRESS 10450 WINE PALM #5721 FT. MYERS, FL 33912 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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:

STREET ADDRESS
CITY-ST-ZiP

MONATURE AND TYPED OR POINTED MAKE OF SIGNING OFFICER OR DIRECTOR

TAP TO STORY OF THE PROPERTY O

FILED