## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P05000095936**

1. Entity Name

KATHLEEN KELLY RD & ASSOCIATES, INC.



Mailing Address

11985 U.S. HWY 1 STE. 202 NORTH PALM BEACH, FL 33408

Principal Place of Business

11985 U.S. HWY 1 STE. 202 NORTH PALM BEACH, FL 33408

## FILED Mar 19, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

 02162007
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 20-3122486
 Applied For Not Applicable

 5. Certificate of Status Desired
 \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KELLY, KATHLEEN A 11985 U.S. HWY 1 STE. 202 NORTH PALM BEACH, FL 33408

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

SIGNATURE_	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Regist	tered Agent signature	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees			\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS			<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVPS KELLY, KATHLEEN A 11985 U.S. HWY 1 STE. 202 NORTH PALM BEACH, FL 33408			-		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KELLY, KATHLEEN A 11985 U.S. HWY 1 STE. 202 NORTH PALM BEACH, FL 33408			U00000672851 03/29/07-80005-019 158.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	:					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
or the corp	certify that the information supplied with this fil on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	to execute this report as req	exemptions controlled the control of	ained in Chapter 119 e the same legal effec er 607, Florida Statute	<ol> <li>Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if</li> </ol>	

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