

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000012522

Entity Name: KNR RESERVATIONS INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

800 VILLAGE SQUARE CROSSING  
112  
PALM BEACH GARDENS, FL 33410

## Current Mailing Address:

800 VILLAGE SQUARE CROSSING  
112  
PALM BEACH GARDENS, FL 33410

## New Principal Place of Business:

500 VILLAGE SQUARE CROSSING  
203  
PALM BEACH GARDENS, FL 33410

## New Mailing Address:

500 VILLAGE SQUARE CROSSING  
203  
PALM BEACH GARDENS, FL 33410

FEI Number: 20-4133321

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERTS, KELLIE N  
1076 SIENA OAKS CIR E  
PALM BEACH GARDENS, FL 33410 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 ( ) Delete  
Name: ROBERTS, KELLIE N  
Address: 1076 SIENA OAKS CIR E  
City-St-Zip: PALM BEACH GARDENS, FL 33410

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KELLIE ROBERTS

P

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date