

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2007 8:00 am
Secretary of State

02-07-2007 90050 034 ***150.00

DOCUMENT # P06000069913

1. Entity Name
KAC3 INC.



Principal Place of Business
**211 SOUTH HAMPTON COURT
NICEVILLE FL 32578**

Mailing Address
**211 SOUTH HAMPTON COURT
NICEVILLE FL 32578**



2. Principal Place of Business - No P.O. Box #

211 South Hampton Ct

Suite, Apt. #, etc.

3. Mailing Address

211 South Hampton Ct

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State
Niceville FL

Zip
32578

Country
U.S.A.

City & State
Niceville FL

Zip
32578

Country
USA

4. FEI Number

20-4903559

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ANDREW, COLEMAN J
211 SOUTH HAMPTON COURT
NICEVILLE FL 32578**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **COLEMAN, KEVIN R**
STREET ADDRESS **211 SOUTH HAMPTON COURT**
CITY - ST - ZIP **NICEVILLE FL 32578**

TITLE **VP** ☐ Delete
NAME **COLEMAN, ANDREW J**
STREET ADDRESS **211 SOUTH HAMPTON COURT**
CITY - ST - ZIP **NICEVILLE FL 32578**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Coleman, Carolyn F**
STREET ADDRESS **211 South Hampton Ct**
CITY - ST - ZIP **Niceville, FL 32578**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Kevin R Coleman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 30 2007

Date

850-897-4442

Daytime Phone #