

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000137809

FILED
Dec 19, 2007
Secretary of State

Entity Name: KENNETH CORPORATION OF FLORIDA

Current Principal Place of Business:

2222 49TH ST. S.
ST. PETERSBURG, FL 33707 US

New Principal Place of Business:

Current Mailing Address:

12723 LAKE VISTA
GIBSONTON, FL 33534 US

New Mailing Address:

415 HAVEN POINT
TREASURE ISLAND, FL 33706 US

FEI Number: 20-8005626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLIFIELD, LONNIE K
12723 LAKE VISTA
GIBSONTON, FL 33534 US

Name and Address of New Registered Agent:

HOLLIFIELD, LONNIE K
415 HAVEN POINT
TREASURE ISLAND, FL 33706 US

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: LONNIE K HOLLIFIELD

12/19/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOLLIFIELD, LONNIE K
Address: 12723 LAKE VISTA
City-St-Zip: GIBSONTON, FL 33534 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOLLIFIELD, LONNIE K
Address: 415 HAVEN POINT
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: S () Change (X) Addition
Name: CLAUSE, CHRIS
Address: 12451 POPASH
City-St-Zip: NORTH FORT MYERS, FL 33903 US

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: LONNIE K HOLLIFIELD

P

12/19/2007

Electronic Signature of Signing Officer or Director

Date