

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000035415

FILED  
Sep 02, 2009  
Secretary of State

Entity Name: DR. JERMAINE L. KENNEDY CONSULTING, INC.

## Current Principal Place of Business:

13231 ARBOR ISLE DRIVE  
TAMPA, FL 33637 US

## New Principal Place of Business:

13210 ARBOR ISLE DRIVE  
SUITE #308  
TAMPA, FL 33637 US

## Current Mailing Address:

13231 ARBOR ISLE DRIVE  
TAMPA, FL 33637 US

## New Mailing Address:

13210 ARBOR ISLE DRIVE  
SUITE #308  
TAMPA, FL 33637 US

FEI Number: 26-2338449

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KENNEDY, JERMAINE  
13231 ARBOR ISLE DRIVE  
TAMPA, FL 33637 US

## Name and Address of New Registered Agent:

KENNEDY, JERMAINE  
13210 ARBOR ISLE DRIVE  
SUITE #308  
TAMPA, FL 33637 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: DR. JERMAINE L. KENNEDY

09/02/2009

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: PVST ( ) Delete  
Name: KENNEDY, JERMAINE  
Address: 13231 ARBOR ISLE DRIVE  
City-St-Zip: TAMPA, FL 33637 US

Title: D ( ) Delete  
Name: KENNEDY, JERMAINE  
Address: 13231 ARBOR ISLE DRIVE  
City-St-Zip: TAMPA, FL 33637 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition  
Name: KENNEDY, JERMAINE  
Address: 13210 ARBOR ISLE DRIVE #308  
City-St-Zip: TAMPA, FL 33637 US

Title: D (X) Change ( ) Addition  
Name: KENNEDY, JERMAINE  
Address: 13210 ARBOR ISLE DRIVE #308  
City-St-Zip: TAMPA, FL 33637 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: DR. JERMAINE L. KENNEDY

PVST

09/02/2009

Electronic Signature of Signing Officer or Director

Date