

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000003784

1. Entity Name
KRISTY K. CLEARY, INC.



Principal Place of Business
**1865 LES CHATEAU BLVD.
SUITE 203
NAPLES, FL 34109**

Mailing Address
**1865 LES CHATEAU BLVD.
SUITE 203
NAPLES, FL 34109 US**



04052004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0392337

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ROSSI, NANCY O
1865 LES CHATEAU BLVD.
SUITE 203
NAPLES, FL 34109**

**DO NOT WRITE
IN THIS SPACE**

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

Nancy O Rossi 4/28/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

U00000142324

04730704-80048-003 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD ROSSI, NANCY 1865 LES CHATEAU BLVD. STE 203 NAPLES, FL 34109
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPD KNOX, RICHARD 1865 LES CHATEAU BLVD. STE 203 NAPLES, FL 34109
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____

Nancy O Rossi 4-28-04