2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P93000029241 1. Entity Name K-C'S RIVER STOP, INC. Principal Place of Business Mailing Address 5819 DRIFTWOOD PARKWAY 5819 DRIFTWOOD PARKWAY CAPE CORAL, FL 33904 CAPE CORAL, FL 33904 01152008 DO NOT WRITE IN THIS SPACE 4. FEI Number 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SERRAGO, CARMINE 5819 DRIFTWOOD PKWY CAPE CORAL, FL 33904

FILED Jan 24, 2008 08:00 Al Secretary of State L. OF SMAR

Fee Required



No Chg-P CR2E034 (11/05) Applied For 65-0408780 Not Applicable \$8.75 Additional

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 Com long CARMINASENAGO 1-1					1-17-08
Signature, typed or printed name of register beragent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$556.00		Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			***
NAME SIREET ADDRESS CITY-ST-ZIP	P SERRAGO, CARMINE 5819 DRIFTWOOD PKWY CAPE CORAL, FL	. :			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SERRAGO, ELIZABETH 5819 DRIFTWOOD PKWY CAPE CORAL, FL				U00000795692 01/29/08-80001-025 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	. ' -		,		
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

239:540 773/ -17.08