


FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000003254

1. Entity Name
K-PRO SUPPLY CO., INC.



Principal Place of Business
2135 WHITFIELD PARK AVE.
SARASOTA, FL 34243

Mailing Address
2135 WHITFIELD PARK AVE.
SARASOTA, FL 34243

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
22-2725174

Applied For
Not Applicable

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

04072006 Chg-P CR2E034 (11/05)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KERRIGAN, CHRISTOPHER T
2135 WHITFIELD PARK AVE.
SARASOTA, FL 34243

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, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

P

KERRIGAN, CHRISTOPHER T

6322 99TH STREET

BRADENTON, FL 34202

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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S

KERRIGAN, JOYCE M

5706 45TH ST. EAST, STE. 250

BRADENTON, FL

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TITLE

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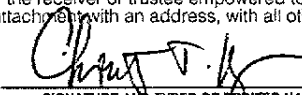
NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:  Christopher T. Kerrigan

4-13-06

941-258-1226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #