

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000010368

Entity Name: KITCHEN WORLD, INC.

FILED  
Apr 01, 2008  
Secretary of State

## Current Principal Place of Business:

4556 ST. AUGUSTINE RD.  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

## Current Mailing Address:

4556 ST. AUGUSTINE RD.  
JACKSONVILLE, FL 32207

## New Mailing Address:

FEI Number: 59-3222296

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

STONEBURNER BERRY & SIMMONS, P.A.  
841 PRUDENTIAL DRIVE, SUITE 1400  
JACKSONVILLE, FL 32207 US

## Name and Address of New Registered Agent:

SIDNEY S. SIMMONS, II  
1050 RIVERSIDE AVE  
JACKSONVILLE, FL 32204 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: SIDNEY S. SIMMONS, II

04/01/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GLOVER, ROBERT T  
Address: 244 PABLO RD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: VP ( ) Delete  
Name: GLOVER, PEGGY H  
Address: 244 PABLO RD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: S ( ) Delete  
Name: GLOVER, PEGGY H  
Address: 244 PABLO RD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: T ( ) Delete  
Name: GLOVER, ROBERT T  
Address: 244 PABLO RD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT T. GLOVER

PRES

04/01/2008

Electronic Signature of Signing Officer or Director

Date