


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90084 039 ***158.75

DOCUMENT # P94000020332 1. Entity Name KENNETH R. ANDREWS INC.																					
Principal Place of Business 21266 PURPLE SAGE LANE BOCA RATON, FL 33428		Mailing Address 21266 PURPLE SAGE LANE BOCA RATON, FL 33428																			
2. Principal Place of Business - No P.O. Box # C/O R Kux 19635 STATE RD 7		3. Mailing Address C/O R Kux 19635 STATE RD 7																			
Suite, Apt. #, etc. SUITE 42		Suite, Apt. #, etc. SUITE 42																			
City & State BOCA RATON, FL		City & State BOCA RATON, FL																			
Zip 33498		Zip 33498																			
Country USA		Country USA																			
4. FEI Number 65-0474871		Applied For <input type="checkbox"/> Not Applicable																			
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required																			
6. Name and Address of Current Registered Agent ANDREWS, KENNETH 21266 PURPLE SAGE LANE BOCA RATON, FL 33428		7. Name and Address of New Registered Agent Name RICHARD KUX Street Address (P.O. Box Number is Not Acceptable) 19635 STATE ROAD 7 SUITE 42 City BOCA RATON FL Zip Code 33498																			
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 <u>RICHARD KUX</u> DATE 1/25/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																			
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">D ANDREWS, KENNETH</td> <td style="width:20%;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">21266 PURPLE SAGE LANE</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">BOCA RATON, FL 33428</td> </tr> </table>		TITLE	D ANDREWS, KENNETH	<input type="checkbox"/> Delete	STREET ADDRESS	21266 PURPLE SAGE LANE		CITY-ST-ZIP	BOCA RATON, FL 33428		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">D/P ANDREWS, KENNETH</td> <td style="width:20%;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">124 CAMERON CIRCLE APT C</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">CLARKESVILLE, GA 30523</td> </tr> </table>		TITLE	D/P ANDREWS, KENNETH	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	124 CAMERON CIRCLE APT C		CITY-ST-ZIP	CLARKESVILLE, GA 30523	
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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: <u>Kenneth Andrews</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 01/31/07 Daytime Phone # 581 4872 88																			