

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000071685

Entity Name: KIRK'S COUNTRY STORE, INC.

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

3151 CANAL RD
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

6712 CYPRESS DR
LAKE WALES, FL 33898 US

New Mailing Address:

FEI Number: 59-3277240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KIRK, ROBERT R
6712 CYPRESS DR
LAKE WALES, FL 33898 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KIRK, ROBERT R
Address: 6712 CYPRESS DR
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: KIRK, SUSAN J.
Address: 6712 CYPRESS DR
City-St-Zip: LAKE WALES, FL 33853

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KIRK, ROBERT R D
Address: 6712 CYPRESS DR
City-St-Zip: LAKE WALES, FL 33898

Title: D (X) Change () Addition
Name: KIRK, SUSAN J D
Address: 6712 CYPRESS DR
City-St-Zip: LAKE WALES, FL 33898

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SUSAN J KIRK

D

01/05/2005

Electronic Signature of Signing Officer or Director

Date