## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000024408

**FILED** Apr 29, 2009 Secretary of State

Entity Name: KAPPY KING COLE, INC. **Current Principal Place of Business: New Principal Place of Business:** 5911 TROPICAL DR 1035 MAIN ST. FORT MYERS, FL 33919 ANDREWS, NC 28901 **Current Mailing Address: New Mailing Address:** 5911 TROPICAL DR P. O. BOX 1323 ANDREWS, NC 28901 FORT MYERS, FL 33919 FEI Number: 65-0572385 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: KENANE, CARRIE L KEOHANE, CARRIE L 8 GEORGE TOWN 8 GEORGE TOWN FORT MYERS, FL 33919 US FORT MYERS, FL 33919 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: CARRIE L KEOHANE 04/29/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition COLE, MARY K Name: Name: POB 1323 Address: Address: City-St-Zip: ANDREWS, NC 28901 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition Name: KOEHANE, CARRIE L Name: KEOHANE, CARRIE L #8 GEORGETOWN #8 GEORGETOWN Address: Address: FORT MYERS, FL 33919 FORT MYERS, FL 33919 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition CANTIENY, CHARLES B Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: CARRIE KEOHANE 04/29/2009 ST

1214 SOUTHWEST 9TH COURT

CAPE CORAL, FL 33991

Address: City-St-Zip: