2008 FOR PROFIT CORPORATION™ **ANNUAL REPORT**

DOCUMENT # P95000029593

1. Entity Name

KENNETH DELARBRE & COMPANY, P.A.



Principal Place of Business

1618 S HIGHLAND AVE CLEARWATER, FL 33756 US Mailing Address

1618 S HIGHLAND AVE CLEARWATER, FL 33756 US

FILED Jan 17, 2008 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01142008 No Chg-P 4. FEI Number		CR2E034 (11/05)		
				Applied For
59-3307			Not Applicable	
		40.5		

5. Certificate of Status Desired

58.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DELARBRE, KENNETH 1618 S HIGHLAND AVE CLEARWATER, FL 34616

SIGNATURE:

DO NOT WRITE IN THIS SPACE

x				•					
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 titls of applicable (NOTE: Registered Agent agent argnature required when reinatating) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	TORS			, , , , , , , , , , , , , , , , , , , ,				
NAME STREET AODRESS CITY-ST-ZIP	D DELARBRE, KENNETH 1618 S HIGHLAND AVE CLEARWATER, FL 33756			<i>:</i>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000787518 01/18/08-80003-005 150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	in '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	• ,						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,							
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.									