


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000002316</b>	
1. Entity Name <b>KENN VISSER CONSULTING, INC.</b>	

Principal Place of Business <b>1754 BAYSHORE DRIVE ENGLEWOOD, FL 34223 US</b>	Mailing Address <b>DAVID A DUNKIN, PA 170 W DEARBORN STREET ENGLEWOOD, FL 34223 US</b>
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**DO NOT WRITE IN THIS SPACE**



01042005 No Chg-P CR2E034 (10/03)

4. FCI Number <b>65-0632887</b>	Applied For <input type="checkbox"/> Not Applied
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**DUNKIN, DAVID A  
170 WEST DEARBORN STREET  
ENGLEWOOD, FL 34223-3290**

**DO NOT WRITE IN THIS SPACE**

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 title (required) FCI Registered Agent signature required with the filing DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

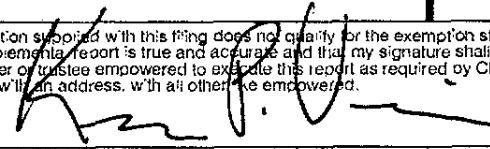
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	PD VISSER, KENN 1754 BAYSHORE DRIVE ENGLEWOOD, FL 34223
TITLE NAME STREET ADDRESS CITY ST ZIP	STD VISSER, LINDA L 1754 BAYSHORE DRIVE ENGLEWOOD, FL 34223
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04/11/05-80030-021 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 I 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 fee empowered.

**SIGNATURE:**  **4/8/05 941 4743153**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE