

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000004120

Entity Name: KENT COMMUNICATIONS, INC.

FILED
Apr 15, 2006
Secretary of State

Current Principal Place of Business:

6671 W INDIANTOWN ROAD
56-132
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

6671 W INDIANTOWN RD
56-132
JUPITER, FL 33458 US

New Mailing Address:

FEI Number: 65-0656035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOBSON, PAUL
6671 W INDIANTOWN RD.
#56-132
JUPITER, FL 33458 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: HOBSON, PAUL
Address: 6671 W INDIANTOWN RD. # 56-132
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: HOBSON, BARBARA
Address: 6671 W INDIANTOWN RD. # 56-132
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: HOBSON, JOANNE
Address: 6671 W INDIANTOWN RD. # 56-132
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: HOBSON, DARRYL
Address: 6671 W INDIANTOWN RD. #56-132
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOBSON, PAUL M
Address: 6671 W INDIANTOWN RD. # 56-132
City-St-Zip: JUPITER, FL 33458

Title: D (X) Change () Addition
Name: HOBSON, BARBARA S
Address: 6671 W INDIANTOWN RD. # 56-132
City-St-Zip: JUPITER, FL 33458

Title: D (X) Change () Addition
Name: FORDE, JOANNE S
Address: 6671 W INDIANTOWN RD. # 56-132
City-St-Zip: JUPITER, FL 33458

Title: D (X) Change () Addition
Name: HOBSON, DARRYL M
Address: 6671 W INDIANTOWN RD. #56-132
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: PAUL M HOBSON

D

04/15/2006

Electronic Signature of Signing Officer or Director

Date