FILE NOW. FILING FEE AFTER MAY 1 IS $50.00

PROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07 1997 8:00am
Secretary of State

[redacted]

DOCUMENT # P96000030016 (5)

Corporation Name
KENNY & COMPANY CONSULTING, INC.

Principal Place of Business
8409 SE DOUBLE TREE DR
HOBE SOUND FL 33455

Mailing Address
8409 SE DOUBLE TREE DR
HOBE SOUND FL 33455-8719

3. Date Incorporated or Qualified: 04/01/1996
3a. Date of Last Report:

Principal Place of Business | 2a. Mailing Address (26)
Suite, Apt. #, etc. | Suite, Apt. #, etc. (27)
City & State | City & State (28)
Zip | Country (25) | Zip (29) | Country (30)

4. FEI Number: 65-0678613 — Applied For / Not Applicable
5. Certificate of Status Desired ☑ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent
KENNY, JEANNEMARIE
8409 SE DOUBLE TREE DR
HOBE SOUND FL 33455

10. Name and Address of New Registered Agent
01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City — FL — 05 Zip Code

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when withdrawing. DATE

OFFICERS AND DIRECTORS

D KENNY, JEANNEMARIE 8409 SE DOUBLE TREE DR HOBE SOUND FL 33455	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☑ Addition
	☐ Change ☐ Addition
CC 5/7	☐ Change ☐ Addition
800002179448 -05/15/97--01021--007 ***173.75	☐ Change ☐ Addition

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jeannemarie Kenny / President — 4/29/97 — 561-288-5253
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #