

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90227 046 ***150.00

DOCUMENT #P96000056322

1. Entity Name
K.I.P. Systems INC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3430 Drivers Lane
Suite, Apt. #, etc.

3. Mailing Address
3430 Drivers Lane
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Middleburg, FL
Zip
32068
Country
USA

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Middleburg, FL
Zip
32068
Country
USA

4. FEI Number
59-3390150
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Keith E. Kersey
Street Address (P.O. Box Number is Not Acceptable)
3430 Drivers Lane
City
Middleburg FL Zip Code
32068

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 **Keith E. Kersey**
Signature, typed or printed name of registered agent and title if applicable.

4-11-03
DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE President	NAME Keith E. Kersey
STREET ADDRESS 3430 Drivers Lane	
CITY-ST-ZIP Middleburg, FL 32068	
TITLE Director	NAME Keith E. Kersey
STREET ADDRESS 3430 Drivers Lane	
CITY-ST-ZIP Middleburg, FL 32068	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	NAME
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Keith E. Kersey**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-03 **904-282-0899**
Date Daytime Phone #

CR2E034B (12/02)