

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P96000063462
1. Corporation Name
KENNEDY MCKENZIE CORPORATION


Principal Place of Business: 9156 GREEN MEADOWS WAY, PALM BEACH GARDENS FL 33418
Mailing Address: 9156 GREEN MEADOWS WAY, PALM BEACH GARDENS FL 33418

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	9145 GREEN MEADOWS WAY	26	9145 GREEN MEADOWS WAY	7/29/96	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number <input checked="" type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
22		27		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	PALM BEACH GARDENS FL	28	PALM BEACH GARDENS FL	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24	33418	25			
29	33418	30			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SCHATSCHNEIDER, RUSTEN				81 Name MCKENZIE, RUSTEN			
9156 GREEN MEADOWS WAY				82 Street Address (P.O. Box Number is Not Acceptable)			
PALM BEACH GARDENS, FL 33418				83 9145 GREEN MEADOWS WAY			
				84 City PALM BEACH GARDENS		85 Zip Code 33418	

11. 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:  DATE: 5/19/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P	12 NAME	P
STREET ADDRESS	SCHATSCHNEIDER, RUSTEN	13 STREET ADDRESS	MCKENZIE, RUSTEN
CITY-ST-ZIP	9156 GREEN MEADOWS WAY	14 CITY-ST-ZIP	9145 GREEN MEADOWS WAY
TITLE	<input type="checkbox"/> DELETE	21 TITLE	PALM BEACH GARDENS FL 33418 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	200002469482 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	-03/26/98--01008--033
STREET ADDRESS		53 STREET ADDRESS	***158.75
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 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:  Rusten McKenzie DATE: 5/19/98 DAYTIME PHONE #: 561-776-9886x115

CR2E034 (10/97)