

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000042344

1. Entity Name
KIMCO OCALA 665, INC.



Principal Place of Business 3333 NEW HYPE PARK ROAD SUITE 100 NEW HYDE PARK FL 11042-0020	Mailing Address 3333 NEW HYPE PARK ROAD SUITE 100 NEW HYDE PARK FL 11042-0020
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1st MOORE CR2E034 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **58-2317767**

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	<input type="checkbox"/> Delete
VP	SCHINDLER, MICHAEL	<input type="checkbox"/>
STREET ADDRESS	3333 NEW HYDE PARK RD	
CITY - ST - ZIP	NEW HYDE PARK NY 11042	
CFO	PAPPAGALLO, MIKE	<input type="checkbox"/>
STREET ADDRESS	3333 NEW HYDE PARK RD	
CITY - ST - ZIP	NEW HYDE PARK NY 11042	
S	KAUDERER, BRUCE	<input type="checkbox"/>
STREET ADDRESS	3333 NEW HYDE PARK RD	
CITY - ST - ZIP	NEW HYDE PARK NY 11042	
T	COHEN, GLENN	<input type="checkbox"/>
STREET ADDRESS	3333 NEW HYDE PARK RD	
CITY - ST - ZIP	NEW HYDE PARK NY 11042	
V	YARMAK, JOEL I	<input type="checkbox"/>
STREET ADDRESS	3333 NEW HYDE PARK RD	
CITY - ST - ZIP	NEW HYDE PARK NY 11042	
P	FLYNN, MICHAEL	<input type="checkbox"/>
STREET ADDRESS	3333 NEW HYDE PARK RD	
CITY - ST - ZIP	NEW HYDE PARK NY 11042	

TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

400000351782
05/03/05-80001-013 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(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 Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-27-05 516869919