## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

"146 SHADY LANE

FREEPORT FL 32439

## P98000030881 DOCUMENT #

Principal Place of Business

1. Entity Name

146 SHADY LANE

FREEPORT, FL 32439

K AND C LAND HOLDINGS COMPANY



## **FILED** Apr 21, 2003 8:00 am Secretary of State

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2. Principal Place of Business			3. Mai	3. Mailing Address				7   100:1441   10   0101   1411  00    00    00    00    00    00    00    00    00    10    10    10    10					
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & State			City	City & State				4. FEI Number 59-3565632 Applied Fo					plied For Applicable
Zip	· .	Country	Zip	Zip Coun		try					\$9.75 Additional		itional
	6. Name	and Address of Cur	rent Registere	ed Agent			<del></del>	7. N	ame and Address of New Regis	tered	Agent	-	
					Name · •								
MAXWELL, S. KIMBERLY					Street Address (P.O. Box Number is Not Acceptable)								
146 SHAD		,											
FREEPOR	T FL 32439												
						City				FL	Zip	Code	•
	named entity		ent for the purp	ose of changing its	registere	ed office or i	registered	d age	ent, or both, in the State of Florida.	Iam	familiar	with, a	and accept
and obligat	one or region	orde agonti											
SIGNATURE .	Signature byned	or printed name of registered	agent and title if age	dicable (NOTE:	Registere	d Agent signatur	e required wi	hen rei	nstating)	DATE		<del></del>	
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		f FEE IS \$150.00 3 Fee will be \$550						-	9. Election Campaign Financi				<b>0</b> мау Ве
		Florida Departme						l	Trust Fund Contribution.	L	<b>,</b>	Added	to Fees
10.		OFFICERS.	AND DIRECTO	I PRS	11.			ADI	DITIONS/CHANGES TO OFFICER	RS AND	DIREC	TORS	SIN 11
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recept 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 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**