2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2005
Secretary of State

DOCUMENT# P98000052846

Entity Name: KASEN ALY, INC.

Current Principal Place of Business:

9136 BONITA BEACH RD
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

9136 BONITA BEACH RD
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 59-3581044 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEWTON, LORNE
331 COLONIAL AVE
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

NEWTON, LORNE
1610 COPELAND DR.
MARCO ISLAND, FL 34145 US

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.

SIGNATURE: LORNE NEWTON 03/06/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GREUSEL, JAMIE B
Address: 1104 N. COLLIER BLVD.
City-St-Zip: MARCO ISLAND, FL 34145

Title: P ( ) Delete
Name: NEWTON, LORNE D
Address: 331 COLONIAL AVE
City-St-Zip: MARCO ISLAND, FL 34145

Title: V ( ) Delete
Name: NEWTON, JULIE A
Address: 331 COLONIAL AVE
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change ( ) Addition
Name: NEWTON, LORNE D
Address: 1610 COPELAND DR.
City-St-Zip: MARCO ISLAND, FL 34145

Title: V (X) Change ( ) Addition
Name: NEWTON, JULIE A
Address: 1610 COPELAND DR.
City-St-Zip: MARCO ISLAND, FL 34145

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORNE NEWTON P 03/06/2005
Electronic Signature of Signing Officer or Director Date