2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000015795

1. Entity Name
KELLAND ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2321 WEST GULF DRIVE UNIT 2B SANIBEL, FL 33957	607 NORTHAVN CIR. GLENSHAW, PA 15116

DO NOT WRITE IN THIS SPACE

03092006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0899504

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DIPARDO, DANIELE R
2321 W GULF DR UNIT 2B
SANIBEL, FL 33957

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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: _____ 3-14-06
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, 2006 Fee will be $550.00

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

U00000483212
04/18/06-80007-009 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	LANDY, WAYNE
STREET ADDRESS	607 NORTHAVEN CIRCLE
CITY-ST-ZIP	GLENSHAW, PA 15116
TITLE	VPD
NAME	KELLY, PAMELA
STREET ADDRESS	10570 CREST RD
CITY-ST-ZIP	WEXFORD, PA 150909444
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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 exemptions contained in Chapter 119, 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: _____ 3-14-06 x 412 487 7582
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #