2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000018374

Entity Name: K.T.M. OF CENTRAL FLORIDA, INC.

FILED Jan 04, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
STE A	36TH PLACE LLE, FL 32600	3			
Current Mailing Address:			New Mailing Address:		
STE A	36TH PLACE LLE, FL 32606	>			
FEI Number: 59-3558621 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
9200 NW 3	TIMOTHY P 36TH PLACE LLE, FL 32600	S US			
	named entity : e of Florida.	submits this statement for the	purpose of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PST () DEEGAN, ARTH 891 ISLAND W CLEARWATER	ΑΥ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () DEEGAN, TIM 9200 NW 36TH GAINESVILLE,		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () DEEGAN, KATH 9200 NW 36TH GAINESVILLE,	PLAVE #A	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DEEGAN, KATHLEEN 9200 NW 36TH PLACE #A GAINESVILLE, FL 32606	
Title: Name: Address: City-St-Zip:	D () RAMIREZ, MAU 9200 NW 36TH GAINESVILLE,	PLAVE #A	Title: Name: Address: City-St-Zip:	D (X) Change () Addition RAMIREZ, MAUREEN 9200 NW 36TH PLACE #A GAINESVILLE, FL 32606	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: TIMOTHY P DEEGAN VP 01/04/2006