


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90127 006 ***150.00

DOCUMENT # P99000051103																																																								
1. Entity Name HKL MANAGEMENT, INC.																																																								
Principal Place of Business 3031 W. PLANTATION PINES COURT LECANTO, FL 34461 US			Mailing Address 2198 MAIN STREET SARASOTA, FL 34237 US																																																					
2. Principal Place of Business - No P.O. Box # 3302 Charles MacDonald Drive		3. Mailing Address P.O. Box 15025																																																						
Suite, Apt. #, etc. Drive		Suite, Apt. #, etc.																																																						
City & State Sarasota, FL		City & State Sarasota, FL		4. FEI Number 65-0924777																																																				
Zip 34240		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																				
6. Name and Address of Current Registered Agent JAENSCH, P. CHRISTOPHER 2198 MAIN STREET SARASOTA, FL 34237		7. Name and Address of New Registered Agent Name: <u>Jacqueline Rall</u> Street Address (P.O. Box Number is Not Acceptable): <u>3302 Charles MacDonald Drive</u> City: <u>Sarasota</u> FL Zip Code: <u>34240</u>																																																						
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: <u>Jacqueline Rall</u> <u>PRESIDENT</u> DATE: <u>3/28/07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)</small>																																																								
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees																																																						
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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: <u>Jacqueline Rall</u> <u>PRESIDENT</u> DATE: <u>3/28/07</u> <u>9413711741</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																								

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