2007 FOR PROFIT CORPORATION

DOCUMENT # S01607

1. Entity Name KAYLANDCO, INC.

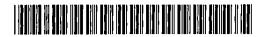


FILED Apr 30, 2007 08:00 Al Secretary of State

Principal Place of Business

151 SOUTH RIVER DRIVE #103 STUART, FL 34997 US Mailing Address

C/O ANTHONY D. GEORGE, JR. 759 S FEDERAL HIGHWAY, STE 206 STUART, FL 34994 US



DO NOT WRITE IN THIS SPACE

01052007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0303392

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GEORGE, ANTHONY D JR 759 S FEDERAL HIGHWAY STE 206 STUART, FL 34994

SIGNATURE:

	,,	•				v				4 .9***	
ţ	Ŀ)(0	N	IC) [[3	Ν	R		E
1	١	١	J .,	Tŀ	41	S	S	SF	Ά	C	E

						इं.क्षी हमकेल श्रीहर अपूर्वनीय में हिन्देहर					
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Trust Fund Contribu		\$5.00 May Be Added to Fees							
10.	OFFICERS AND DIREC	TORS	2014/46841 4584.1		the state of the property of	The contract of the contract o					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVPS SMITH, KRISTA 21 CLAYTON CIRCLE WERNERSVILLE, PA 19565			the Adams of 1994 than the high and 1997 This come are the Thin the come are the	Eiropanister Mitter	and the property on the control of t					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SMITH, KRISTA 21 CLAYTON CIRCLE WERNERSVILLE, PA 19565				概念的特殊的問題的	521 33-005 150.00					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- -		ek, talendari. A	NOT WR						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			h com history and st		THIS SPA	A Property of the State of the					
TITLE NAME STREET ADDRESS CITY+ST-ZIP					green om ryke et jaget stad jage krees ook hade to be dage stad teknoor teknoor ook ook sijde teknoor ook ook ook ook ook	And the second of the second o					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						angent grant and and an early Manager to the control of the control of Manager to the control of					
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 officer like empowered.											