


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90317 047 ***150.00

DOCUMENT # S09722	
1. Entity Name W.M.K. MARKETING, INC.	

Principal Place of Business 13300 INDIAN ROCKS RD VILLA 104 LARGO FL 33774 US	Mailing Address 13300 INDIAN ROCKS RD VILLA 104 LARGO FL 33774 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State Zip	City & State Zip	Country	Country
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1st MOORE CR2E034 (10/04)

4. FEI Number 59-3040631		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent LYONS, GARY W 311 S MISSOURI AVE CLEARWATER FL 33756		7. Name and Address of New Registered Agent Name THOMAS C. JENNINGS III Street Address (P.O. Box Number is Not Acceptable) 703 COURT STREET City CLEARWATER FL 33756 Zip Code

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 Thomas Jennings 04 07 05
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, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KANE, WILLIAM J., JR. 14441 PASSAGEWAY SEMINOLE FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KANE, WILLIAM J., JR. 13300 INDIAN ROCKS RD, VILLA 104 LARGO, FL. 33774 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST KANE, MARIANNE T. 14441 PASSAGEWAY SEMINOLE FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST KANE, MARIANNE T. 13300 INDIAN ROCKS RD, VILLA 104 LARGO, FL. 33774 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: William J. Kane Jr WILLIAM J KANE JR 4/6/05 727 545 6054
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #