



# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S34748</b> 1. Entity Name <b>WILLIAM KENNEDY FARMS, INC.</b>			
Principal Place of Business <b>1797 BACOM POINT ROAD PAHOKEE, FL 33476</b>		Mailing Address <b>1797 BACOM POINT ROAD PAHOKEE, FL 33476</b>	
<div style="text-align: right;">             03302008    No Chg-P    CR2E034 (11/05)         </div>			
4. FEI Number <b>65-0258668</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b>  <b>KENNEDY, WILLIAM R. 1797 BACOM POINT ROAD PAHOKEE, FL 33476</b>			
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: _____ DATE: _____ <small>Signature: Typed or printed name of registered agent and if not applicable (NOTE: Registered Agent signature required when re-registering)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>000000914586</b> <b>05/08/08-80062-025 150.00</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCD KENNEDY, WILLIAM R. 1797 BACOM POINT ROAD PAHOKEE, FL		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD KENNEDY, KIRK 2543 BACOMPOINT RD PAHOKEE, FL		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD KENNEDY, DIANE H. 1797 BACOM POINT ROAD PAHOKEE, FL		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	   		
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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			
<b>SIGNATURE:</b> <i>William R. Kennedy</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>4.16.08</b> <b>561.984.7946</b> <small>Date    Printing Program</small>	