2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S49036

1. Entity Name
KWIKY FOOD MART, INC.

Principal Place of Business	Mailing Address
7613 E. WASHINGTON MONTICELLO, FL 32344	7613 E. WASHINGTON ~~MONTICELLO~~ MONTICELLO, FL 32344

DO NOT WRITE IN THIS SPACE

44001928

01082004   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
59-3126400		Not Applicable

5. Certificate of Status Desired   ☐ $8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KINSEY, WARREN
RT 1 BOX 164-6
MONTICELLO, FL 32344

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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

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution.   ☐   **$5.00** May Be
Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	PST
NAME	KINSEY, WARREN
STREET ADDRESS	1944 BIG JOE ROAD
CITY-ST-ZIP	MONTICELLO, FL
TITLE	D
NAME	KINSEY, WARREN
STREET ADDRESS	1944 BIG JOE ROAD
CITY-ST-ZIP	MONTICELLO, FL
TITLE	VSD
NAME	KINSEY, WAYNE
STREET ADDRESS	1944 BIG JOE ROAD
CITY-ST-ZIP	MONTICELLO, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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: _Warren Kinsey_   1/12/04   850-997-4041
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #