

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 586220  
1. Entity Name  
KANADIANA ENTERPRISES, INC



FILED

04 APR -7 PM 1:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
1539 LANDINGS BLVD  
Suite, Apt. #, etc.  
SARASOTA, FL  
City & State  
Zip 34231 Country U.S.A

3. Mailing Address  
7291 KILMER AVE S.E.  
Suite, Apt. #, etc.  
City & State  
GRAND RAPIDS MI  
Zip 49512 Country U.S.A

DO NOT WRITE IN THIS SPACE

4. FEI Number  
65-0300792  
Applied For  
Not Applicable

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

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
Carol MacAllister  
Street Address (P.O. Box Number is Not Acceptable)  
1539 Landings Blvd  
Sarasota  
City  
FL Zip Code 34231

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 *Carol MacAllister* DATE April 4, 2004  
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MACALLISTER CAROL  
PRESIDENT  
1539 LANDINGS BLVD, SARASOTA FL 34231

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
500030802775  
03/19/04--01039--007 \*\*150.00

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VICE PRESIDENT  
PETER MACALLISTER  
7291 KILMER AVE S.E.  
GRAND RAPIDS, MI 49512

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
SECRETARY - TREASURER  
WESLEY MACALLISTER  
7291 KILMER AVE S.E.  
GRAND RAPIDS, MI 49512

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Carol MacAllister* Date March 1, 2004 Daytime Phone # 941-925-1442  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)