

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L70991
 1. Entity Name
 K-2, INC.



Principal Place of Business
 C/O WILLIAM K. SCRUGGS, JR.
 656 N. BEAL PARKWAY
 FORT WALTON BEACH, FL 32547

Mailing Address
 C/O WILLIAM K. SCRUGGS, JR.
 656 N. BEAL PARKWAY
 FORT WALTON BEACH, FL 32547



03172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 59-3012943

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 SCRUGGS, WILLIAM K JR
 656 N. BEAL PARKWAY
 FORT WALTON BEACH, FL 32547

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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: *William K Scruggs Jr* DATE: 4/30/05

Signature, typed or printed name of registered agent and title if applicable Typed or printed name of registered agent signature required when reinstating DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$350.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SCRUGGS, KIM Y
STREET ADDRESS	656 N. BEAL PARKWAY
CITY-ST-ZIP	FT. WALTON BEACH, FL 32547
TITLE	D
NAME	SCRUGGS, WILLIAM K JR
STREET ADDRESS	656 N. BEAL PARKWAY
CITY-ST-ZIP	FT. WALTON BEACH, FL 32547
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 05/04/05-80025-005 150.00

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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)(f), 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 K Scruggs Jr* DATE: 4/30/05 DAYTIME PHONE #: 850 863 4270

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #