

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M96761

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: KAITLYN ENTERPRISES, INC.

**Current Principal Place of Business:**

C/O SCOTT MCQUEEN  
2314 PATIO CIRCLE  
PT. ST. LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SCOTT MCQUEEN  
2314 PATIO CIRCLE  
PT. ST. LUCIE, FL 34952

**New Mailing Address:**

FEI Number: 65-0067711      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCQUEEN, SCOTT  
2314 PATIO CIRCLE  
PT. ST. LUCIE, FL 34952

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: MCQUEEN, SCOTT,  
Address: 2314 PATIO CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL

Title: DVS (X) Delete  
Name: MCQUEEN, NANCY,  
Address: 2314 PATIO CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL

Title: DT ( ) Delete  
Name: KANE, JEAN,  
Address: 271 TICHENOR AVE  
City-St-Zip: S. ORANGE, NJ

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT MCQUEEN

DP

04/30/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date