

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002855

FILED  
Mar 14, 2008  
Secretary of State

Entity Name: KILBOY ESTATE INC.

**Current Principal Place of Business:**

2469 IRONWORKS PIKE  
LEXINGTON, KY 40511

**New Principal Place of Business:**

**Current Mailing Address:**

2469 IRONWORKS PIKE  
LEXINGTON, KY 40511

**New Mailing Address:**

FEI Number: 20-2115122      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 US

**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: RYAN, SHANE  
Address: DOLLA SILVERMINES LO TIPPERARY  
City-St-Zip: IRELAND,

Title: VP ( ) Delete  
Name: KINSELLA, DENIS  
Address: 8 NEVERN ROAD  
City-St-Zip: LONDON SW5 9PJ ENGLAND,

Title: S ( ) Delete  
Name: STRAPPE, RICHARD  
Address: LYNNS DEMESNE, CELLBRIDGE CO KILDARE  
City-St-Zip: IRELAND, FL

Title: T ( ) Delete  
Name: HAGER, ELIZABETH S  
Address: 2469 IRONWORKS PIKE  
City-St-Zip: LEXINGTON, KY 40511

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

Title: DP (X) Change ( ) Addition  
Name: RYAN, SHANE  
Address: 10 ELM PARK RD  
City-St-Zip: LONDON SW3 6BB ENGLAND, EN

Title: VP (X) Change ( ) Addition  
Name: KINSELLA, DENIS  
Address: 8 NEVERN ROAD  
City-St-Zip: LONDON SW5 9PJ ENGLAND, EN

Title: S (X) Change ( ) Addition  
Name: STRAPPE, RICHARD  
Address: LYNNS DEMESNE, CELLBRIDGE CO KILDARE  
City-St-Zip: IRELAND, IR

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CONNIE BISHOP

S

03/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date