

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M72595

FILED
Jan 27, 2009
Secretary of State

Entity Name: KRAUSE WATCH COMPANY, INC.

Current Principal Place of Business:

3103 PGA BLVD
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

10895 TEA OLIVE LANE
BOCA RATON, FL 33498 US

New Mailing Address:

FEI Number: 65-0038714 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAUSE, KARIN
4441 LACEY OAK DRIVE
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

KRAUSE, ALLISON
10895 TEA OLIVE LANE
BOCA RATON, FL 33498 US

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: ALLISON KRAUSE

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KRAUSE, KARIN
Address: 4441 LACEY OAK DR
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DP () Delete
Name: KRAUSE, STAN
Address: 10895 TEA OLIVE LANE
City-St-Zip: BOCA RATON, FL 33498

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: KRAUSE, STAN
Address: 10895 TEA OLIVE LANE
City-St-Zip: BOCA RATON, FL 33498

Title: SEC (X) Change () Addition
Name: KRAUSE, KARIN
Address: 4441 LACEY OAK DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TRS () Change (X) Addition
Name: KRAUSE, ALLISON
Address: 10895 TEA OLIVE LANE
City-St-Zip: BOCA RATON, FL 33498

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: ALLISON KRAUSE

TRS

01/27/2009

Electronic Signature of Signing Officer or Director

Date