## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #852232**

1. Entity Name

**GK TECHNOLOGIES, INCORPORATED** 



FILED Apr 07, 2008 08:00 All Secretary of State

Principal Place of Business

Mailing Address

4 TESSENEER DR

HIGHLAND HEIGHTS, KY 41076 US

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S US



DO NOT WRITE IN THIS SPACE

03262008 No Chg-P CR2E034 (11/05)

4. FEI Number 13-3064555 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

## DO NOT WRITE IN THIS SPACE

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										
FILE NOWI!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finan     Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees						
10.	OFFICERS AND DIREC	CTORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO KENNY, GREGORY 7756 TECUMSEH TR. CINCINNATI, OH 45243				U00000884864 04/17/08-80061-005 150.00					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD ROBINSON, BRIAN J 6307 TRAIL RIDGE COURT LOVELAND, OH 45140		i		04/11/05-00081-000 130.00					
NAME STREET ADDRESS CITY-SI-ZIP	VPDS SIVERD, ROBERT J. 6700 ALBERLY RD. CINCINNATI, OH 45243			DO	NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WHELAN, JEFFREY J 9006 PATRICKS GLEN CINCINNATI, OH 45242			IN '	THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP										
TITLE NAME STREET ADDRESS										

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

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CITY-ST-ZIP

MAWH

Jeffrey J. Whelan

4/3/2008

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Daytime Phone #