

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006836

Entity Name: N.D.Y. INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

10150 DANIELS PARKWAY
FT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

10150 DANIELS PARKWAY
FT MYERS, FL 33913

New Mailing Address:

FEI Number: 41-1500818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YENISH, TOM
10150 DANIELS PARKWAY
FT MYERS, FL 33913 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: C () Delete
Name: YENISH, TOM
Address: 3910 WILLIAMSON RD
City-St-Zip: FORT MYERS, FL 33905

Title: P () Delete
Name: YENISH, NORB
Address: 3910 WILLIAMSON RD
City-St-Zip: FORT MYERS, FL 33905

Title: V () Delete
Name: YENISH, DONNA
Address: 1092 WEST CLIFF CURVE
City-St-Zip: SHOREVIEW, MN 55126

Title: S () Delete
Name: YENISH, PATTI
Address: 8030 MT CURVE BLVD
City-St-Zip: BROOKLYN PARK, MN 55445

Title: T () Delete
Name: LANG, DIANE
Address: 459 THOMPSON AVE W
City-St-Zip: WEST ST PAUL, MN 551183026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: YENISH, PATTI
Address: 12054 LEDGEWOOD CIRCLE
City-St-Zip: FORT MYERS, FL 33913

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

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

Title: S (X) Change () Addition
Name: YENISH, TOM
Address: 3910 WILLIAMSON RD.
City-St-Zip: FORT MYERS, FL 33905

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: PATTI YENISH

DIR.

04/27/2007

Electronic Signature of Signing Officer or Director

Date