2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006199

Entity Name: KRAVCO MAINTENANCE COMPANY

FILED Jul 19, 2007 Secretary of State

Current Principal Place of Business:		New P	New Principal Place of Business:	
234 MALL BLVD. KING OF PRUSSIA, PA 194062954			234 MALL BLVD. KING OF PRUSSIA, PA 19406 US	
Current Mailing Address:		New M	New Mailing Address:	
234 MALL E KING OF P	BLVD. RUSSIA, PA 194062954		ALL BLVD. OF PRUSSIA, PA 19406 US	
FEI Number:	23-2327544 FEI Number Applie	d For () FEI Number Not	Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
BLANTON, EDWARD F 810 THOMASVILLE ROAD TALLAHASSEE, FL 32303 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.				
SIGNATUR	RE: Electronic Signature of Rec	ristered Agent	Date	
Election Carr	te with s. 607.193(2)(b), F.S., the corporation of the contribution of the contributio	tion ().	TIONS/CHANGES TO OFFICERS AND DIRECTORS: PD (X) Change () Addition	
Name: Address: City-St-Zip:	POWELL, JON R 234 MALL BLVD. KING OF PRUSSIA, PA 194062954	Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	D () Delete POWELL, ARTHUR L 234 MALL BLVD. KING OF PRUSSIA, PA 194062954	Title: Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	D () Delete POWER, RICHARD S 234 MALL BLVD. KING OF PRUSSIA, PA 194062954	Title: Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	D () Delete SIMON, DAVID 115 W. WASHINGTON STREET INDIANAPOLIS, IN 46204	Title: Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	D () Delete SOKOLOV, RICHARD 115 W. WASHINGTON STREET INDIANAPOLIS, IN 46204	Title: Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	D () Delete STERRETT, STEPHEN 115 W. WASHINGTON STREET INDIANAPOLIS, IN 46204	Title: Name: Address: City-St-Z		

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: JON R. POWELL PRES 07/19/2007