

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002071

Entity Name: DIRECTECH MDU, INC.

FILED  
Jul 23, 2007  
Secretary of State

## Current Principal Place of Business:

33 WEST SECOND STREET  
SUITE 504  
MAYSVILLE, KY 41056

## New Principal Place of Business:

## Current Mailing Address:

33 WEST SECOND STREET  
SUITE 504  
MAYSVILLE, KY 41056

## New Mailing Address:

FEI Number: 20-4352918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete  
Name: J. BASIL MATTINGLY,  
Address: 33 WEST SECOND STREET #504  
City-St-Zip: MAYSVILLE, KY 41056

Title: DCOO ( ) Delete  
Name: BEAUDREAU, THOMAS A  
Address: 615 ROMA VALLEY ROAD  
City-St-Zip: FT. COLLINS, CO 80525

Title: SD ( ) Delete  
Name: JOHANSON, DAVID R  
Address: 1792 SECOND STREET  
City-St-Zip: NAPA, CA 94559

Title: VD ( ) Delete  
Name: BLOCK, HENRY E  
Address: 2185 EAST REMUS  
City-St-Zip: MT. PLEASANT, MI 48858

Title: VD ( ) Delete  
Name: SCHAFER, BERNARD J  
Address: 2185 EAST REMUS  
City-St-Zip: MT. PLEASANT, MI 48858

Title: TD ( ) Delete  
Name: WALLINGFORD, DAVID N  
Address: 33 WEST SECOND STREET #504  
City-St-Zip: MAYSVILLE, KY 41056

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: DAVID N. WALLINGFORD

TD

07/23/2007

Electronic Signature of Signing Officer or Director

Date