2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# F06000002071

Entity Name: DIRECTECH MDU, INC.

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

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: TOM BEAUDREAU DCCO 04/30/2008

Electronic Signature of Signing Officer or Director — Date