

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003973

FILED
Jan 29, 2009
Secretary of State

Entity Name: KOTKA GROUP, INC.

Current Principal Place of Business:

7804 FAIRVIEW ROAD
CHARLOTTE, NC 28226

New Principal Place of Business:

6400 FAIRVIEW ROAD
CHARLOTTE, NC 28210

Current Mailing Address:

7804 FAIRVIEW ROAD, BOX 306
CHARLOTTE, NC 28226

New Mailing Address:

FEI Number: 20-1994794 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: P () Delete
Name: COX, PATRICIA C
Address: 7804 FAIRVIEW ROAD, BOX 306
City-St-Zip: CHARLOTTE, NC 28226

Title: VP () Delete
Name: TOMPKINS, LUCIA A
Address: 7804 FAIRVIEW ROAD, BOX 306
City-St-Zip: CHARLOTTE, NC 28226

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COX, PATRICIA C
Address: 7804 FAIRVIEW ROAD, BOX 306
City-St-Zip: CHARLOTTE, NC 28226

Title: VP (X) Change () Addition
Name: TOMPKINS, LUCIA A
Address: 7804 FAIRVIEW ROAD, BOX 306
City-St-Zip: CHARLOTTE, NC 28226

Title: VP () Change (X) Addition
Name: COX, WILLIAM F
Address: 7804 FAIRVIEW ROAD #306
City-St-Zip: CHARLOTTE, NC 28226

Title: SEC () Change (X) Addition
Name: COX, THOMAS C
Address: 7804 FAIRVIEW ROAD #306
City-St-Zip: CHARLOTTE, NC 28226

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: PATRICIA C COX

PRES

01/29/2009

Electronic Signature of Signing Officer or Director

_____ Date