2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# F08000004217

Entity Name: DAMON CORP.

Current Principal Place of Business:

2958 GATEWAY DR.
ELKHART, IN 46514

New Principal Place of Business:

604 MIDDLETON RUN ROAD
ELKHART, IN 46516 US

Current Mailing Address:

P.O. BOX 2888
ELKHART, IN 46515

New Mailing Address:

FEI Number: 35-1731618 **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: CHRM ( ) Delete
Name: THOMPSON, WADE F.B.
Address: 419 WEST PIKE STREET
City-St-Zip: JACKSON CENTER, OH 45334

Title: VS ( ) Delete
Name: BENNETT, WALTER L
Address: 419 WEST PIKE STREET
City-St-Zip: JACKSON CENTER, OH 45334

Title: T ( ) Delete
Name: ORTHWEIN, PETER B
Address: 419 WEST PIKE STREET
City-St-Zip: JACKSON CENTER, OH 45334

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM (X) Change ( ) Addition
Name: THOMPSON, WADE F.B.
Address: 419 WEST PIKE STREET
City-St-Zip: JACKSON CENTER, OH 45334 US

Title: VS (X) Change ( ) Addition
Name: BENNETT, WALTER L
Address: 419 WEST PIKE STREET
City-St-Zip: JACKSON CENTER, OH 45334 US

Title: T (X) Change ( ) Addition
Name: ORTHWEIN, PETER B
Address: 419 WEST PIKE STREET
City-St-Zip: JACKSON CENTER, OH 45334 US

Title: PRES ( ) Change (X) Addition
Name: FENECH, WILLIAM C
Address: 604 MIDDLETON RUN ROAD
City-St-Zip: ELKHART, IN 46516 US

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: WILLIAM C. FENECH PRES 04/14/2009

Electronic Signature of Signing Officer or Director — Date