

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000001999

**FILED**  
**Jul 09, 2010**  
**Secretary of State**

**Entity Name:** KACHEMAK RESEARCH DEVELOPMENT, INC.

**Current Principal Place of Business:**

59584 EAST END RD  
HOMER, AK 99603

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 15422  
HOMER, AK 99603

**New Mailing Address:**

**FEI Number:** 92-0164753

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: RILEY, COLLEEN A  
Address: 59584 EAST END RD PO BOX 15422  
City-St-Zip: HOMER, AK 99603

Title: VPS  
Name: RILEY, LARRY E  
Address: 59584 EAST END RD PO BOX 15422  
City-St-Zip: HOMER, AK 99603

I hereby 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 all other like empowered.

SIGNATURE: COLLEEN ATWOOD RILEY

PT

07/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date