

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001067

FILED  
Jul 19, 2011  
Secretary of State

**Entity Name:** K TOOL CORPORATION OF MICHIGAN

**Current Principal Place of Business:**

31111 WIXON RD  
WIXOM, MI 48393

**New Principal Place of Business:**

31111 WIXOM RD  
WIXOM, MI 48393

**Current Mailing Address:**

PO BOX 1004  
WIXOM, MI 48393

**New Mailing Address:**

**FEI Number:** 38-2340290

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KAY, ED  
10509 CURRY PALM LANE  
FT MYERS, FL 33966 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: C  
Name: KAY, EDWARD  
Address: 10509 CURRY PALM LANE  
City-St-Zip: FT MYERS, FL 33966

Title: D  
Name: PETRILLI, ALFRED  
Address: 1497 TORREY RD  
City-St-Zip: GROSSE POINTE WOODS, MI 48236

Title: P  
Name: GEISINGER, ROBERT  
Address: PO BOX 1004  
City-St-Zip: WIXOM, MI 48393

Title: V  
Name: ALESSANDRINI, ERIKA  
Address: PO BOX 1004  
City-St-Zip: WIXOM, MI 48393

Title: S  
Name: KAY, NANCY  
Address: PO BOX 1004  
City-St-Zip: WIXOM, MI 48393

Title: T  
Name: STAUP, DEBBIE  
Address: PO BOX 1004  
City-St-Zip: WIXOM, MI 48393

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: DEBBIE STAUP

TRES

07/19/2011

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

\_\_\_\_\_  
Date