2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F63077

Entity Name: KIBLER CHEMICAL CORPORATION

FILED Jan 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1610 ORANGE AVE

ST CLOUD, FL 34769 US

Current Mailing Address: New Mailing Address:

1610 ORANGE AVE.

ST CLOUD, FL 34769 US

FEI Number: 59-2152729 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KIBLER, CONNIE L KIBLER, CONNIE L 1856 SAILFISH CT 1150 EDEN DRIVE

KISSIMMEE, FL 34744 US SAINT CLOUD, FL 34771 US

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: CONNIE L. KIBLER 01/03/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: KIBLER, CHARLES B, Name: KIBLER, CHARLES B,

Address: 1856 SAILFISH CT Address: 1150 EDEN DRIVE
City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: SAINT CLOUD, FL 34771

Title: STD () Delete Title: STD (X) Change () Addition Name: KIBLER. CONNIE. Name: KIBLER. CONNIE.

Name:KIBLER, CONNIE,Name:KIBLER, CONNIE,Address:1856 SAILFISH CTAddress:1150 EDEN DRIVECity-St-Zip:KISSIMMEE, FL 34744City-St-Zip:SAINT CLOUD, FL 34771

Title: VPD () Delete Title: () Change () Addition

 Name:
 WEISS, GARY
 Name:

 Address:
 2949 CIALLELA PASS
 Address:

 City-St-Zip:
 ST CLOUD, FL 34771
 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

 Name:
 WECK, KELLY
 Name:

 Address:
 3016 DIAMOND LANE
 Address:

 City-St-Zip:
 ST. CLOUD, FL 34771
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CONNIE L. KIBLER SEC. 01/03/2007