

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006038

Entity Name: KURT BLUEMEL, INC.

FILED
May 20, 2005
Secretary of State

Current Principal Place of Business:

2740 GREENE LANE
BALDWIN, MD 21013

New Principal Place of Business:

Current Mailing Address:

2740 GREENE LANE
BALDWIN, MD 21013

New Mailing Address:

FEI Number: 52-0806231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULTZ, DAVE
5475 OSCEOLA DR
ST CLOUD, FL 34733 US

Name and Address of New Registered Agent:

SCHULTZ, DAVE
8737 HOLOPAW GROVES ROAD
ST CLOUD, FL 34773 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:

05/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: BLUEMEL, HANNAH
Address: 2543 HESS RD
City-St-Zip: FALLSTON, MD 21047

Title: V () Delete
Name: BETZ, CATHERINE
Address: 2740 GREENE LANE
City-St-Zip: BALDWIN, MD 21013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BLUEMEL, HANNAH
Address: 2737 GLEN ELYN WAY
City-St-Zip: BALDWIN, MD 21013

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BARBARA LOMBARDI

CFO

05/20/2005

Electronic Signature of Signing Officer or Director

Date