

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003146

Entity Name: KENT TECHNOLOGIES, INC.

FILED
Jan 27, 2009
Secretary of State

Current Principal Place of Business:

140 E. HILO
NAPLES, FL 34113

New Principal Place of Business:

2051 TRADE CENTER WAY
NAPLES, FL 34109

Current Mailing Address:

90 SPRING ST
PO BOX 327
KENT CITY, MI 49330

New Mailing Address:

2051 TRADE CENTER WAY
NAPLES, FL 34109

FEI Number: 38-3461451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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:

HL STATUTORY AGENT, INC.
800 LAUREL OAK DRIVE
#600 M&I BUILDING
NAPLES, FL 34108 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: JEFFREY FOLKMAN

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: KENT, RICHARD J
Address: 835 PETERS ROAD
City-St-Zip: CASNOVIA, MI 49318

Title: PD (X) Delete
Name: ESCH, THOMAS
Address: 140 E HILO
City-St-Zip: NAPLES, FL 34113

Title: ST (X) Delete
Name: GOODFELLOW, RANDALL E
Address: 90 SPRING ST
City-St-Zip: KENT CITY, MI 49330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: LIPPERT, L D
Address: 2051 TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109

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

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

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: L.D. LIPPERT

CD

01/27/2009

Electronic Signature of Signing Officer or Director

Date