

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G07673

FILED
Mar 20, 2009
Secretary of State

Entity Name: KRAILLING ENTERPRISES, INC.

Current Principal Place of Business:

342 3RD AVENUE N
SAINT PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

342 3RD AVENUE N
SAINT PETERSBURG, FL 33701 US

New Mailing Address:

FEI Number: 59-2239372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, BRIAN C
342 3RD AVE N
SUITE 10
SAINT PETERSBURG, FL 33701 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: BECHER, WILHELM R
Address: 215 9TH AVENUE NE
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VP () Delete
Name: COX, STEPHANIE T
Address: 342 3RD AVENUE N
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: S () Delete
Name: BECHER, CHRISTINE
Address: 215 9TH AVENUE NE
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: PRM () Delete
Name: HOLVOET, JOHANNA B
Address: STIEGLITZWEG 2A
City-St-Zip: VATERSTETTEN, GE 85591

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CHRISTINE BECHER

S

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date