2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H51252

Entity Name: KSI, INC.

FILED Apr 18, 2006 Secretary of State

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

321 CHRLOTTE ST 321 CHARLOTTE ST

SAINT AUGUSTINE, FL 32084 US SAINT AUGUSTINE, FL 32084 US

Current Mailing Address: New Mailing Address:

321 CHRLOTTE ST 321 CHARLOTTE ST

SAINT AUGUSTINE, FL 32084 US SAINT AUGUSTINE, FL 32084 US

FEI Number: 59-2537244 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:

KELLY, JAMES F.

321 CHARLOTTE ST

KELLY, JAMES F.

321 CHARLOTTE ST

SAINT AUGUSTINE, FL 32084 US SAINT AUGUSTINE, FL 32084 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: JAMES F KELLY 04/18/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

Name: KELLY, JAMES F.,
Address: 321 CHARLOTTE ST

Name: KELLY, JAMES F
Address: 321 CHARLOTTE ST

City-St-Zip: SAINT AUGUSTINE, FL 32084 City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: DST () Delete Title: DST (X) Change () Addition Name: KELLY, DEANNA B., Name: KELLY, DEANNA B

 Address:
 321 CHARLOTTE ST
 Address:
 321 CHARLOTTE ST

 City-St-Zip:
 SAINT AUGUSTINE, FL 32084
 City-St-Zip:
 SAINT AUGUSTINE, FL 32084

Title: DV () Delete Title: DV (X) Change () Addition

 Name:
 HUNT, MIRIAM K.,
 Name:
 HUNT, MIRIAM K.

 Address:
 25 GREENVIEW WAY
 Address:
 25 GREENVIEW WAY

 City-St-Zip:
 UPPER MONTCLAIR, NJ
 City-St-Zip:
 UPPER MONTCLAIR, NJ

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: JAMES F. KELLY DP 04/18/2006