

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K16534

FILED
Apr 28, 2007
Secretary of State

Entity Name: KANATERRA CORPORATION

Current Principal Place of Business:

700 E MOODY BLVD
BOX 727
BUNNELL, FL 321100727

New Principal Place of Business:

700 E MOODY BLVD
BOX 727
BUNNELL, FL 32110 US

Current Mailing Address:

700 E MOODY BLVD
BOX 727
BUNNELL, FL 321100727

New Mailing Address:

P O BOX 727
BUNNELL, FL 32110 US

FEI Number: 59-3060263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANAKARIS, JOHN M., M.D.
700 E. MOODY BLVD.
P.O. BOX 727
BUNNELL, FL 32010 US

Name and Address of New Registered Agent:

CANAKARIS, JOHN M MD
700 E. MOODY BLVD.
BOX 727
BUNNELL, FL 32110 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: JOHN M CANAKARIS MD

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CANAKARIS, JOHN M.,
Address: 700 E. MOODY BLVD
City-St-Zip: BUNNELL, FL

Title: VD () Delete
Name: CANAKARIS, GEORGIA K, .
Address: 700 E. MOODY BLVD
City-St-Zip: BUNNELL, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CANAKARIS, JOHN M MD
Address: P O BOX 727
City-St-Zip: BUNNELL, FL 32110 US

Title: SD (X) Change () Addition
Name: CANAKARIS, GEORGIA
Address: P O BOX 727
City-St-Zip: BUNNELL, FL 32110 US

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: JOHN M CANAKARIS MD

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04/28/2007

Electronic Signature of Signing Officer or Director

Date