

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K36325

FILED
Mar 02, 2010
Secretary of State

Entity Name: KATY EQUIPMENT, INC.

Current Principal Place of Business:

2750 TAYLOR AVENUE
SUITE D
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

2750 TAYLOR AVENUE
SUITE D
ORLANDO, FL 32806 US

New Mailing Address:

FEI Number: 59-2911072 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARSZCZ, DAVID
2750 TAYLOR AVE STE. D
ORLANDO, FL 32906 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: PD
Name: BARRALES, DAVID J
Address: 2945 LAKE PINELOCH BLVD
City-St-Zip: ORLANDO, FL 32806

Title: D
Name: BARRALES, KATY L
Address: 2811 MARSALA CT.
City-St-Zip: ORLANDO, FL 32806

Title: D
Name: STORCH, SUSAN
Address: 1126 LAKE WILLISARA CIR.
City-St-Zip: ORLANDO, FL 32806

Title: D
Name: ZAHORODNI, SUSAN G
Address: 2750 TAYLOR AVE
City-St-Zip: ORLANDO, FL 32806

Title: VP
Name: CALLAWAY, MICHAEL R.
Address: 1668 ARBOR DR
City-St-Zip: MELBOURNE, FL 32935

Title: S
Name: ALLEN, CASEY S
Address: 6261 BENT PINE DR.
City-St-Zip: ORLANDO, FL 32822

I hereby 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 all other like empowered.

SIGNATURE: DAVID J. BARRALES

PRES

03/02/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date