

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L20226

FILED
Mar 05, 2008
Secretary of State

Entity Name: KNOCK'M DEAD ENTERPRISES, INC.

Current Principal Place of Business:

727 SOUTH NOVA RD
ORMOND BEACH, FL 32174

New Principal Place of Business:

1295 N US 1 SUITE #6
ORMOND BEACH, FL 32174

Current Mailing Address:

727 SOUTH NOVA RD
ORMOND BEACH, FL 32174

New Mailing Address:

1295 N. US 1 SUITE #6
ORMOND BEACH, FL 32174

FEI Number: 59-2971822

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEBLETON, BRIAN
18 FOX HOLLOW DRIVE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

STEBLETON, TODD C
1 PARKSIDE WAY
ORMOND BEACH, FL 32174 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: TODD C. STEBLETON

03/05/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STESLETON, BRIAN C
Address: 18 FOX HOLLOW RD
City-St-Zip: ORMOND BEACH, FL 32174

Title: STD () Delete
Name: STEBLETON, JULAINE T
Address: 18 FOX HOLLOW DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: VPD () Delete
Name: STEBLETON, B. SCOTT
Address: 1113 PARKSIDE DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: VPD (X) Delete
Name: STESLETON, TODD C
Address: 1 PARKSIDE WAY
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: STEBLETON, TODD C
Address: 1 PARKSIDE WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: VPD (X) Change () Addition
Name: STEBLETON, NATALIE J
Address: 1 PARKSIDE WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: S/T (X) Change () Addition
Name: STEBLETON, BRIAN C
Address: 18 FOX HOLLOW DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

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: BRIAN C. STEBLETON

S/T

03/05/2008

Electronic Signature of Signing Officer or Director

Date