

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000147

Entity Name: KT INDUSTRIES LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

3925 ARDMORE AVENUE
FORT WAYNE, IN 46802

New Principal Place of Business:

504 SUMMERFIELD WAY
VENICE, FL 34292

Current Mailing Address:

3925 ARDMORE AVENUE
FORT WAYNE, IN 46802

New Mailing Address:

504 SUMMERFIELD WAY
VENICE, FL 34292

FEI Number: 35-2154078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNOR, LAWRENCE J
302 B-1521 TAMIAMI TRAIL SOUTH
VENICE, FL 34292 US

Name and Address of New Registered Agent:

O'CONNOR, LAWRENCE J
504 SUMMERFIELD WAY
VENICE, FL 34292 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: LAWRENCE J O'CONNOR

04/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: O'CONNOR, LAWRENCE J
Address: 302 B-1521 TAMIAMI TRAIL SOUTH
City-St-Zip: VENICE, FL 34292

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: O'CONNOR, LAWRENCE J
Address: 504 SUMMERFIELD WAY
City-St-Zip: VENICE, FL 34292

Title: MGR () Change (X) Addition
Name: KRUGER, MARGARET
Address: 504 SUMMERFIELD WAY
City-St-Zip: VENICE, FL 34292

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAWRENCE J O'CONNOR

PRES

04/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date