2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# N02000008910

Entity Name: KOMBIT C.R.E.O.L.E. INC.

Current Principal Place of Business:

1815 CREEKWOOD LN
ORANGE PARK, FL 32003

New Principal Place of Business:

Current Mailing Address:

1815 CREEKWOOD LN
ORANGE PARK, FL 32003

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARNWINE, DOROTHY S
1815 CREEKWOOD LN
ORANGE PARK, FL 32003 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

OFFICERS AND DIRECTORS:

Title: CEOP ( ) Delete
Name: ARNWINE, DOROTHY S
Address: 1815 CREEKWOOD LN
City-St-Zip: ORANGE PARK, FL 32003

Title: V ( ) Delete
Name: ARNWINE, ED. D., PATRICK O DR.
Address: 1815 CREEKWOOD LN
City-St-Zip: ORANGE PARK, FL 32003

Title: V ( ) Delete
Name: ST. JUSTE, SHIRLEY
Address: 534 CODY CT
City-St-Zip: ORANGE PARK, FL 32078

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: ARNWINE, ED. D., PATRICK O
Address: 1815 CREEKWOOD LN
City-St-Zip: ORANGE PARK, FL 32003

Title: VP (X) Change ( ) Addition
Name: ST. JUSTE, SHIRLEY
Address: 534 CODY CT
City-St-Zip: ORANGE PARK, FL 32078

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICK O. ARNWINE VP 04/27/2007

Electronic Signature of Signing Officer or Director — Date