2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE

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FILED Mar 07, 2007 08:00 AM DOCUMENT # P00000080412 **Secretary of State** 1. Entity Name KIRK MADSEN & COMPANY, INC./APACHE SYSTEMS Principal Place of Business Mailing Address **7855 66TH AVENUE** PO BOX 332 VERO BEACH FL 32967 WINTER BEACH FL 32971 2. Principal Place of Business - No P O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite Apt #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-2395543 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MADSEN, KIRK Street Address (P.O. Box Number is Not Acceptable) **7855 66TH AVENUE** VERO BEACH FL 32967 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE . Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. IIILE ☐ Delete HILE ☐ Change ☐ Addition MADSEN, KIRK NAME NAME 7855 66TH AVENUE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32967 CITY-SI-ZIP CITY-ST-ZIP U00000658513 03/15/07-80040-017 clarge . Oth Addition ☐ Delete THE MADSEN, NANCY J NAME NAME 7855 66TH AVE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32967 CITY-SI-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREE! ADDRESS CITY ST-ZIP 011Y-57-71P TITLE ☐ Delete IIILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-SI-7IP DILE Delete TITLE Change ☐ Add₁tion NAME NAME. STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP HHE Delete ☐ Change ☐ Addition HILE NAME. STREET ADDRESS STRLET ADDRESS CITY-SI-7IP CHY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplied that reports rule and accurate and that my signature shall have the same logal officet as if made under eath; that I am an officer or director of the corporation or the receiver or trustor empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attack and that my name appears in Block 10 or Block 11.

KIRIC MAUSEN