

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000051541

Entity Name: KMC CORPORATION

FILED
Aug 31, 2007
Secretary of State

Current Principal Place of Business:

6601 LYONS RD
E7
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

6601 LYONS RD
E7
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 65-1102491 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINGER, RONALD
6601 LYONS RD
COCONUT CREEK, FL 33073 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: P () Delete
Name: FINGER, RONALD
Address: 6601 LYONS RD
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP () Delete
Name: NOIK, JULIAN
Address: 6601 LYONS RD
City-St-Zip: COCONUT CREEK, FL 33073

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP () Change (X) Addition
Name: STAMBAUGH, TROY R
Address: 122 VIA SANTA CRUZ
City-St-Zip: JUPITER, FL 33458

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: RONALD FINGER

P

08/31/2007

Electronic Signature of Signing Officer or Director

Date