2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000074412

FILED
May 01, 2005
Secretary of State

Entity Name: KATIDID, INC.

Current Principal Place of Business:

601 FALKENBURG RD S
#1-2
TAMPA, FL 336198051

New Principal Place of Business:

Current Mailing Address:

601 FALKENBURG RD S
#1-2
TAMPA, FL 336198051

New Mailing Address:

FEI Number: 11-3643675 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, KATHERINE L ESQ
2033 MAIN STREET, SUITE 600
SARASOTA, FL 34237 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: OD ( ) Delete
Name: LESTER, JR., KENNETH T
Address: 4931 80TH AVE. CIR. E
City-St-Zip: SARASOTA, FL 34237

Title: OD ( ) Delete
Name: LESTER, KENNETH T SR
Address: 3237 HAWKS NEST DRIVE
City-St-Zip: KISSIMMEE, FL 34741

Title: OFF ( ) Delete
Name: SMITH, KATHERINE L
Address: 2033 MAIN STREET, SUITE 600
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: KATHERINE L. SMITH   OFF   05/01/2005
Electronic Signature of Signing Officer or Director   Date