

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000077167

Entity Name: KODIAK INVESTMENTS, INC.

FILED
Mar 02, 2005
Secretary of State

Current Principal Place of Business:

365 SW ANGELA TERRACE
LAKE CITY, FL 32024

New Principal Place of Business:

Current Mailing Address:

365 SW ANGELA TERRACE
LAKE CITY, FL 32024

New Mailing Address:

FEI Number: 03-0472848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMANELLO, DUANE
1919-8 BLANDING BLVD
JACKSONVILLE, FL 32210 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: D () Delete
Name: SMITH, BOBBY T
Address: 476 ANGELA ST
City-St-Zip: LAKE CITY, FL 32024

Title: D () Delete
Name: SMITH, BARBARA F
Address: 476 ANGELA ST
City-St-Zip: LAKE CITY, FL 32024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SMITH, BOBBY T
Address: 365 SW ANGELA TERR
City-St-Zip: LAKE CITY, FL 32024

Title: D (X) Change () Addition
Name: SMITH, BARBARA F
Address: 365 SW ANGELA TERR
City-St-Zip: LAKE CITY, FL 32024

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: BOBBY T SMITH

D

03/02/2005

Electronic Signature of Signing Officer or Director

Date