

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095537

Entity Name: KHAKI BLUE, INC.

FILED
Apr 03, 2008
Secretary of State

Current Principal Place of Business:

202 SOUTH ROME AVE., STE. 100
TAMPA, FL 33606

Current Mailing Address:

202 SOUTH ROME AVE., STE. 100
TAMPA, FL 33606

New Principal Place of Business:

300 BEACH DRIVE NE
APT 2801
ST PETERSBURG, FL 33701

New Mailing Address:

300 BEACH DRIVE NE
APT 2801
ST PETERSBURG, FL 33701

FEI Number: 52-2381495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, MATTHEW J
202 SOUTH ROME AVE., STE. 100
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

DYER, DAVID F
300 BEACH DRIVE NE
APT 2801
ST PETERSBURG, FL 33701 US

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: DAVID F DYER

04/03/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: DYER, DAVID
Address: 100 BEACH DR NE #1802
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VP () Delete
Name: DYER, HARRIETT
Address: 100 BEACH DR NE #1802
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: DYER, DAVID
Address: 300 BEACH DR NE APT 2801
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VP (X) Change () Addition
Name: DYER, HARRIETT
Address: 300 BEACH DR NE APT 2801
City-St-Zip: SAINT PETERSBURG, FL 33701

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: DAVID F DYER

PTSD

04/03/2008

Electronic Signature of Signing Officer or Director

Date