

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000124256

Entity Name: K.B. INDUSTRIES, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

28100, US HWY 19 NORTH,
SUITE 410
CLEARWATER, FL 33761

Current Mailing Address:

28100, US HWY 19 NORTH,
SUITE 410
CLEARWATER, FL 33761

New Principal Place of Business:

28100 US HWY 19 NORTH,
SUITE 410
CLEARWATER, FL 33761

New Mailing Address:

28100 US HWY 19 NORTH,
SUITE 410
CLEARWATER, FL 33761

FEI Number: 02-0653997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITTLE, THOMAS C
2123 N.E. COACHMAN ROAD
SUITE A
CLEARWATER, FL 33765 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: CCEO () Delete
Name: BAGNALL, KEVIN
Address: 2957 PALMETTO COURT
City-St-Zip: DUNEDIN, FL 34698

Title: SVP () Delete
Name: MAY, DAVID A
Address: 3931 OLD NINE FOOT RD
City-St-Zip: WINTERHAVEN, FL 33880

Title: S () Delete
Name: AXELROD, RONALD
Address: 300 LINDEN OAKS SUITE 220
City-St-Zip: ROCHESTER, NY 14625

Title: T () Delete
Name: BAGNALL, MELISSA
Address: 2957 PALMETTO CT
City-St-Zip: DUNEDIN, FL 34698

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

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

Title: COO () Change (X) Addition
Name: WYLIE, PAUL
Address: 11400 LAKEVIEW PKWY
City-St-Zip: VILLA RICA, GA 30180

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: MELISSA BAGNALL

T

04/22/2009

Electronic Signature of Signing Officer or Director

Date