2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000001332

1. Entity Name
KTD, INC.

Principal Place of Business	Mailing Address
660 W 23RD ST PANAMA CITY, FL 32405	660 W 23RD ST PANAMA CITY, FL 32405

DO NOT WRITE IN THIS SPACE

01082007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-0531623	Not Applicable

5. Certificate of Status Desired   ☒   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HARE, DIANE C
2589 JENKS AVE
PANAMA CITY, FL 32405

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MEISNER, CHRISTIE
STREET ADDRESS	1219 THOMAS DRIVE #141
CITY-ST-ZIP	PANAMA CITY, FL 32408

TITLE	STD
NAME	MEISNER, GILBERT
STREET ADDRESS	1219 THOMAS DRIVE #141
CITY-ST-ZIP	PANAMA CITY, FL 32408

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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04/05/07-80036-020 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Gilbert Meisner_   2/27/07   850 3198713

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #