

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000003468

FILED
Jul 18, 2007
Secretary of State**Entity Name:** KD MANUFACTURING, INC.**Current Principal Place of Business:**5900 US 1
GRANT, FL 32949**New Principal Place of Business:**1720 MAIN ST. NE
UNIT 1
PALM BAY, FL 32905**Current Mailing Address:**P.O. BOX 93
GRANT, FL 32949**New Mailing Address:**1720 MAIN ST NE
UNIT 1
PALM BAY, FL 32905**FEI Number:** 11-3709430**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COTE, KATHY L
5900 US 1
GRANT, FL 32949 US**Name and Address of New Registered Agent:**COTE, KATHY L
1720 MAIN ST. NE
UNIT 1
PALM BAY, FL 32905 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: KATHY L. COTE

07/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: COTE, KATHY L
Address: 5900 US 1
City-St-Zip: GRANT, FL 32949

Title: DV () Delete
Name: HOMERY, ALEXANDER
Address: 5900 US 1
City-St-Zip: GRANT, FL 32949

Title: DV () Delete
Name: COTE, WAYNE E
Address: 5900 US 1
City-St-Zip: GRANT, FL 32949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: COTE, KATHY L
Address: 1720 MAIN ST. NE, UNIT 1
City-St-Zip: PALM BAY, FL 32905

Title: DV (X) Change () Addition
Name: HOMERY, ALEXANDER
Address: 1720 MAIN ST NE, UNIT 1
City-St-Zip: PALM BAY, FL 32905

Title: DV (X) Change () Addition
Name: COTE, WAYNE E
Address: 1720 MAIN ST NE, UNIT 1
City-St-Zip: PALM BAY, FL 32950

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: KATHY L. COTE

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07/18/2007

Electronic Signature of Signing Officer or Director

Date