2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 12, 2009
Secretary of State

DOCUMENT# P04000010296

Entity Name: KLUPPY HOMES, INC

Current Principal Place of Business:

33351 TERRAGONA DR
SORRENTO, FL 32776 US

New Principal Place of Business:

Current Mailing Address:

33351 TERRAGONA DR
SORRENTO, FL 32776 US

New Mailing Address:

FEI Number: 20-0582682 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLUPENGER, WILLIAM C
33351 TERRAGONA DRIVE
SORRENTO, FL 32776 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

OFFICERS AND DIRECTORS:

Title: CEO (X) Delete
Name: KLUPENGER, MICHAEL R
Address: 11427 BAIRD ROAD
City-St-Zip: AMHERST, OH 44001 US

Title: P ( ) Delete
Name: KLUPENGER, WILLIAM C
Address: 33351 TERRAGONA DRIVE
City-St-Zip: SORRENTO, FL 32776 US

Title: VP ( ) Delete
Name: KLUPENGER, NICOLE E.
Address: 33351 TERRAGONA DRIVE
City-St-Zip: SORRENTO, FL 32776 US

Title: SEC (X) Delete
Name: KLUPENGER, SHARON A
Address: 11427 BAIRD ROAD
City-St-Zip: AMHERST, OH 44001 US

Title: TRS (X) Delete
Name: KLUPENGER, SHARON H
Address: 2068 LEANNE COURT
City-St-Zip: WINTER PARK, FL 32792 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: KLUPENGER, WILLIAM C
Address: 33351 TERRAGONA DRIVE
City-St-Zip: SORRENTO, FL 32776 US

Title: PRES (X) Change ( ) Addition
Name: KLUPENGER, NICOLE E.
Address: 33351 TERRAGONA DRIVE
City-St-Zip: SORRENTO, FL 32776 US

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

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

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: NICOLE KLUPENGER PRES 05/12/2009

Electronic Signature of Signing Officer or Director — Date