2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# P04000160993

Entity Name: K. ANDERSON GROUP, INC.

Current Principal Place of Business:

3956 SW HONEY TERRACE
PALM CITY, FL 34990

New Principal Place of Business:

4785 SE BINNACLE WAY
STUART, FL 34997

Current Mailing Address:

3956 SW HONEY TERRACE
PALM CITY, FL 34990

New Mailing Address:

PO BOX 1372
PORT SALERNO, FL 34992

FEI Number: 33-1000051 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BANKS, MICHAEL R
27 E. OCEAN BLVD
STUART, FL 34994 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: DPVP ( ) Delete
Name: ANDERSON, KARL H
Address: 3956 SW HONEY TERRACE
City-St-Zip: PALM CITY, FL 34990

Title: S ( ) Delete
Name: ANDERSON, BECKIE S
Address: 3956 SW HONEY TERRACE
City-St-Zip: PALM CITY, FL 34990

Title: T ( ) Delete
Name: ANDERSON, KARL H
Address: 3956 SW HONEY TERRACE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVP (X) Change ( ) Addition
Name: ANDERSON, KARL H
Address: PO BOX 1372
City-St-Zip: PORT SALERNO, FL 34992

Title: S (X) Change ( ) Addition
Name: ANDERSON, KARL H
Address: PO BOX 1372
City-St-Zip: PORT SALERNO, FL 34992

Title: T (X) Change ( ) Addition
Name: ANDERSON, KARL H
Address: PO BOX 1372
City-St-Zip: PORT SALERNO, FL 34992

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: KARL H. ANDERSON DPVP 01/23/2009

Electronic Signature of Signing Officer or Director — Date