

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000006646

Entity Name: WKD, INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

1891 PORTER LAKE DRIVE
UNIT 101
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

1891 PORTER LAKE DRIVE
UNIT 101
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 41-2163781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLATTNER, DOUGLAS D
1891 PORTER LAKE DRIVE
UNIT 101
SARASOTA, FL 34240 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: D () Delete
Name: PLATTNER, DOUGLAS D
Address: 3118 WALTER TRAVIS DRIVE
City-St-Zip: SARASOTA, FL 34240

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D () Change (X) Addition
Name: PLATTNER, DOUGLAS D
Address: 6100 NW 167 ST
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Change (X) Addition
Name: PLATTNER, DOUGLAS D
Address: 6100 NW 167 ST
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Change (X) Addition
Name: PLATTNER, DOUGLAS D
Address: 6100 NW 167 ST
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Change (X) Addition
Name: PLATTNER, DOUGLAS D
Address: 6100 NW 167 ST
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Change (X) Addition
Name: PLATTNER, DOUGLAS D
Address: 6100 NW 167 ST
City-St-Zip: MIAMI LAKES, FL 33014

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: DOUGLAS D PLATTNER

D

03/23/2009

Electronic Signature of Signing Officer or Director

Date