

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025235

Entity Name: KD-DID, INC.

FILED  
Sep 05, 2006  
Secretary of State

## Current Principal Place of Business:

8411 N GREENWOOD AVE  
TAMPA, FL 33617

## New Principal Place of Business:

## Current Mailing Address:

8411 N GREENWOOD AVE  
TAMPA, FL 33617

## New Mailing Address:

FEI Number: 20-2289548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GEER, ALAN K CPA  
7401 D TEMPLE TERRACE HWY  
TAMPA, FL 33637 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SCHMIDT, WILLIAM  
Address: 8411 N. GREENWOOD AVENUE  
City-St-Zip: TAMPA, FL 33617

Title: V ( ) Delete  
Name: SCHMIDT, KIMBERLY  
Address: 8411 N. GREENWOOD AVENUE  
City-St-Zip: TAMPA, FL 33617

Title: T ( ) Delete  
Name: REA, DORCAS  
Address: 3970 APPLETREE DRIVE  
City-St-Zip: VALRICO, FL 33594

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: KIMBERLY SCHMIDT

V

09/05/2006

Electronic Signature of Signing Officer or Director

Date