

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000028271

**FILED**  
**Apr 15, 2009**  
**Secretary of State**

**Entity Name:** KAD DESIGN SERVICES, INC.

**Current Principal Place of Business:**

925 SE 17TH STREET  
SUITE C  
OCALA, FL 34471

**New Principal Place of Business:**

5571 N.E. 4TH AVENUE  
OCALA, FL 34479

**Current Mailing Address:**

925 SE 17TH STREET  
SUITE C  
OCALA, FL 34471

**New Mailing Address:**

5571 N.E. 4TH AVENUE  
OCALA, FL 34479

**FEI Number:** 20-2439764

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURMESTER, KARL C  
925 SE 17TH STREET  
SUITE C  
OCALA, FL 34471 US

**Name and Address of New Registered Agent:**

BURMESTER, KARL C  
5571 N.E. 4TH AVENUE  
OCALA, FL 34479 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:** KARL C. BURMESTER

04/15/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PST ( ) Delete  
**Name:** BURMESTER, KARL C  
**Address:** 925 SE 17TH STREET  
**City-St-Zip:** Ocala, FL 34471

**Title:** VD ( ) Delete  
**Name:** BURMESTER, KARL C  
**Address:** 925 SE 17TH STREET  
**City-St-Zip:** Ocala, FL 34471

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PST (X) Change ( ) Addition  
**Name:** BURMESTER, KARL C  
**Address:** 5571 N.E. 4TH AVENUE  
**City-St-Zip:** Ocala, FL 34479

**Title:** VD (X) Change ( ) Addition  
**Name:** BURMESTER, KARL C  
**Address:** 5571 N.E. 4TH AVENUE  
**City-St-Zip:** Ocala, FL 34479

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 C. BURMESTER

PST

04/15/2009

Electronic Signature of Signing Officer or Director

Date