

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000077181

Entity Name: KGS ENGINEERING, INC.

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

4450 SWALLOWTAIL DRIVE  
NEW PORTY RICHEY, FL 34653

## New Principal Place of Business:

## Current Mailing Address:

4450 SWALLOWTAIL DRIVE  
NEW PORTY RICHEY, FL 34653

## New Mailing Address:

FEI Number: 27-0124096

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEFANIAK, GLENN T  
4450 SWALLOWTAIL DRIVE  
NEW PORTY RICHEY, FL 34653 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: DP ( ) Delete  
Name: STEFANIAK, GLENN T  
Address: 4450 SWALLOWTAIL DRIVE  
City-St-Zip: NEW PORTY RICHEY, FL 34653

Title: DVST ( ) Delete  
Name: STEFANIAK, KELLIE A  
Address: 4450 SWALLOWTAIL DRIVE  
City-St-Zip: NEW PORTY RICHEY, FL 34653

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: STEFANIAK, GLENN T  
Address: 4450 SWALLOWTAIL DRIVE  
City-St-Zip: NEW PORTY RICHEY, FL 34653

Title: DVPS (X) Change ( ) Addition  
Name: STEFANIAK, KELLIE A  
Address: 4450 SWALLOWTAIL DRIVE  
City-St-Zip: NEW PORTY RICHEY, FL 34653

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: GLENN T. STEFANIAK

DPT

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date