2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000155599

Entity Name: KEY PRODUCT ADVANCEMENT, INC.

FILED Apr 28, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4648 SMOKEY RD 362 GULF BREEZE PKWY #200 GULF BREEZE, FL 32563 GULF BREEZE, FL 32561

Current Mailing Address: New Mailing Address:

4648 SMOKEY RD 362 GULF BREEZE PKWY #200 GULF BREEZE, FL 32563 GULF BREEZE, FL 32561

FEI Number: 20-3843615 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HALSALL, LESLIE

4648 SMOKEY RD

GULF BREEZE, FL 32563 US

OLIVER, JOHN P
362 GULF BREEZE PKWY #200
GULF BREEZE, FL 32561 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: JOHN P OLIVER 04/28/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

Name: OLIVER, JOHN P Name: OLIVER, JOHN P

Address: 4648 SMOKEY RD Address: 362 GULF BREEZE PKWY #200 City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: GULF BREEZE, FL 32561

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: JOHN P OLIVER MR. 04/28/2007