

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000168226

Entity Name: K.W. FORSTER, INC.

FILED
Jul 03, 2007
Secretary of State

Current Principal Place of Business:

3607 99TH STREET WEST
BRADENTON, FL 34210 US

New Principal Place of Business:

Current Mailing Address:

3607 99TH STREET WEST
BRADENTON, FL 34210 US

New Mailing Address:

FEI Number: 34-1191812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORSTER, VALERIE C.
3607 99TH STREET WEST
BRADENTON, FL 34210 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: DIR () Delete
Name: FORSTER, VALERIE C DIRECTR
Address: 3607 99TH STREET W
City-St-Zip: BRADENTON, FL 34210 US

Title: DIR () Delete
Name: FORSTER, MARK DIRECTR
Address: 2209 S.E. 32ND TERRACE
City-St-Zip: CAPE CORAL, FL 33904 US

Title: DIR () Delete
Name: FORSTER, BRUCE DIRECTR
Address: 215 SWISS LAKE DRIVE
City-St-Zip: CARY, NC 27513 US

Title: DIR () Delete
Name: FORSTER, KURT DIRECTR
Address: 117 CRESTWOOD COURT SOUTH
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: DIR () Delete
Name: HOOVER, MICHAEL S DIRECTR
Address: 119 EAST STATE STREET
City-St-Zip: ALLIANCE, OH 44601 US

Title: DIR () Delete
Name: OGLINE, MICHAEL DIRECTR
Address: 1844 WEST STATE STREET
City-St-Zip: ALLIANCE, OH 44601 US

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:

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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 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: VALERIE C. FORSTER

DIR

07/03/2007

Electronic Signature of Signing Officer or Director

Date