2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000067435

Entity Name: KDSM, CORP.

FILED Apr 25, 2007 Secretary of State

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

4445 NORTH A1A SUITE 223 VERO BEACH, FL 32963

Current Mailing Address: New Mailing Address:

4445 NORTH A1A SUITE 223 VERO BEACH, FL 32963

FEI Number: 20-4903296 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:

DODSON, PAUL 4445 NORTH A1A SUITE 223 VERO BEACH, FL 32963 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DODSON, KAREN DODSON, KAREN Name: Name: 4445 NORTH A1A #223 4445 NORTH A1A #223 Address: Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32963

Title: D () Delete Title: DT (X) Change () Addition

 Name:
 DODSON, PAUL
 Name:
 DODSON, PAUL

 Address:
 4445 NORTH A1A #223
 Address:
 4445 NORTH A1A #223

 City-St-Zip:
 VERO BEACH, FL 32963
 City-St-Zip:
 VERO BEACH, FL 32963

Title: D () Delete Title: DS (X) Change () Addition Name: MURPHY, SUSAN Name: MURPHY, SUSAN

 Name:
 MURPHY, SUSAN
 Name:
 MURPHY, SUSAN

 Address:
 4445 NORTH A1A #223
 Address:
 4445 NORTH A1A #223

 City-St-Zip:
 VERO BEACH, FL 32963
 City-St-Zip:
 VERO BEACH, FL 32963

Title: D () Delete Title: DV (X) Change () Addition

 Name:
 MURPHY, TIMOTHY
 Name:
 MURPHY, TIMOTHY

 Address:
 4445 NORTH A1A #223
 Address:
 4445 NORTH A1A #223

 City-St-Zip:
 VERO BEACH, FL 32963
 City-St-Zip:
 VERO BEACH, FL 32963

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: PAUL DODSON T 04/25/2007