2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000096775

S D

Name:

Address:

City-St-Zip:

KRAUS, ARTHUR E

DERRY, NH 03038

7 INDEPENDENCE AVE

FILED Apr 08, 2009 Secretary of State

Entity Name: KRAUS ASSOCIATES, INC. **Current Principal Place of Business: New Principal Place of Business:** 326 PORTA ROSA CIRCLE ST. AUGUSTINE, FL 32092 **Current Mailing Address: New Mailing Address:** 7 INDEPENDENCE AVE **DERRY, NH 03038** FEI Number: 02-0529836 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: KRAUS, ELAINE M 326 PORTA ROSA CIRCLE ST. AUGUSTINE, FL 32092 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 KRAUS, ELAINE M Name: Name: KRAUS, ELAINE M 326 PORTA ROSA CIRCLE 326 PORTA ROSA CIRCLE Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32092 City-St-Zip: ST. AUGUSTINE, FL 32092 Title: Title: () Delete (X) Change () Addition Name: KRAUS, ELAINE M Name: KRAUS, ARTHUR E 326 PORTA ROSA CIRCLE 7 INDEPENDENCE AVE Address: Address: ST. AUGUSTINE, FL 32092 DERRY, NH 03038 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: ELAINE M. KRAUS 04/08/2009