2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000074932

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

LONDON E163RH, XX

RANDERS-DENMARK, XX

ODOUR, WILLIAM

RYLEPARKEN 10

() Delete

FILED Apr 28, 2008 Secretary of State

Entity Nar	ne: THE KEN	IYA DEVELOPMENT FUND CO	DRPORATION			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
656 DENT TALLAHAS	STREET SSEE, FL 3230	04				
Current Mailing Address:			New Maili	New Mailing Address:		
656 DENT TALLAHAS	STREET SSEE, FL 3230	04				
FEI Number:	77-0693546	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
656 DENT	BARACK O STREET SSEE, FL 3230	04 US				
The above in the State	named entity s of Florida.	submits this statement for the p	urpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent			nt	Date		
Election Can	npaign Financing	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITION	IS/CHANGE	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () ABONYO, BARA 656 DENT STR TALLAHASSEE	EET	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	OTURA, GEOR 2369 LAKESHO	Delete GE O REV DRE BLVD WEST #414 NTARIO CANADA, 164734104	Title: Name: Address: City-St-Zip:	D OLUOCH, P P.O. BOX 40 NAIROBI, KI		
Title: Name: Address:	D () ORIARO, JOSE 70 HOSKINS C		Title: Name: Address:	D KELLOG, S ⁻ 6164 JASON		

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

TALLAHASSEE, FL 32317 US

2761 MEADOW LAKE DR EAST NO 6

OTIENDE, ERICK

MEMPHIS, TN 38115 US

(X) Change () Addition

SIGNATURE: BARACK OTIENO ABONYO Ρ 04/28/2008