2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000092316

Entity Name: KENN VISSER CONSULTING, INC.

FILED Jan 19, 2009 Secretary of State

8230 HARBORSIDE CIRCLE 204 KAPAHULU AVENUE

ENGLEWOOD, FL 34224 1101

HONOLULU, HI 96815

Current Mailing Address: New Mailing Address:

DAVID A DUNKIN, PA 204 KAPAHULU AVENUE

170 W DEARBORN STREET 1101

ENGLEWOOD, FL 34223 HONOLULU, HI 96815 US

FEI Number: 65-0632887 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DUNKIN, DAVID A DUNKIN, DAVID A 170 WEST DEARBORN STREET

170 WEST DEARBORN STREET ENGLEWOOD, FL 342233290 US ENGLEWOOD, FL 34223

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: 01/19/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

PO BOX 966

PENTICTON, BC, CA V2A 6J9

Address: City-St-Zip: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition VISSER, KENN Name: VISSER, KENN

Name: 8230 HARBORSIDE CIRCLE 204 KAPAHULU AVENUE, #1101 Address: Address:

City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: HONOLULU, HI 96815

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

Name: VISSER, LINDA L Name: VISSER, LINDA L

8230 HARBORSIDE CIRCLE 204 KAPAHULU AVENUE, #1101 Address: Address:

ENGLEWOOD, FL 34224 HONOLULU, HI 96815 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition DEACON, PATRICK Name:

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: KENN VISSER PD 01/19/2009