

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000085916

FILED
Feb 19, 2008
Secretary of State

Entity Name: KITCHEN DESIGNS BY CLAY, CORP.

Current Principal Place of Business:

2175 HAWKS RIDGE DR
#1204
NAPLES, FL 34105

New Principal Place of Business:

7935 AIRPORT PULLING ROAD, N.
SUITE #5
NAPLES, FL 34109

Current Mailing Address:

2175 HAWKS RIDGE DR
#1204
NAPLES, FL 34105

New Mailing Address:

7935 AIRPORT PULLING ROAD, N.
SUITE #5
NAPLES, FL 34109

FEI Number: 65-0960604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COX, CLAYTON
2175 HAWKS RIDGE DRIVE
1204
NAPLES, FL 34105 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COX, CLAYTON P
Address: 2175 HAWKS RIDGE DR #1204
City-St-Zip: NAPLES, FL 34105

Title: V () Delete
Name: COX, KELLY S
Address: 2175 HAWKS RIDGE DRIVE #1204
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KELLY COX

V

02/19/2008

Electronic Signature of Signing Officer or Director

Date