

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J56296

Entity Name: K.D.A. ENTERPRISES, INC.

FILED
Mar 18, 2005
Secretary of State

Current Principal Place of Business:

13010 WHISPERING RIDGE DR
BONITA SPRINGS, FL 34135

New Principal Place of Business:

18590 SANDALWOOD POINTE
FT. MYERS, FL 33908

Current Mailing Address:

13010 WHISPERING RIDGE DR
BONITA SPRINGS, FL 34135

New Mailing Address:

18590 SANDALWOOD POINTE
FT. MYERS, FL 33908

FEI Number: 59-2770774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, KIM
23010 WHISPERING RIDGE DR
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

GRAHAM, KIM
18590 SANDALWOOD POINTE
FT. MYERS, FL 33908 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: KIM GRAHAM

03/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRAHAM, DAVID,
Address: 23010 WHISPERING RIDGE DR
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP () Delete
Name: GRAHAM, KIM,
Address: 23010 WHISPERING RIDGE DR
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRAHAM, DAVID,
Address: 18590 SANDALWOOD POINTE
City-St-Zip: FT. MYERS, FL 33908

Title: VP (X) Change () Addition
Name: GRAHAM, KIM,
Address: 18590 SANDALWOOD POINTE
City-St-Zip: FT. MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KIM GRAHAM

VP

03/18/2005

Electronic Signature of Signing Officer or Director

Date