

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 688638

FILED
Jan 05, 2010
Secretary of State

Entity Name: CAL-TECH TESTING, INC.

Current Principal Place of Business:

3309 SW SR-247
LAKE CITY, FL 32024

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1625
LAKE CITY, FL 32056

New Mailing Address:

FEI Number: 59-2039727 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, AMY M
259 NW RHODEN LN
LAKE CITY, FL 32055 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: CEO
Name: CREAMER, LINDA M
Address: 1152 NW SCENIC LAKE DRIVE
City-St-Zip: LAKE CITY, FL 32055

Title: PD
Name: CREAMER, LINDA M.
Address: 1152 NW SCENIC LAKE DRIVE
City-St-Zip: LAKE CITY, FL 32055

Title: VST
Name: BROWN, AMY
Address: 259 NW RHODEN GLENN
City-St-Zip: LAKE CITY, FL 32055

Title: SV
Name: CREAMER, CALVIN
Address: 3309 SW SR-247
City-St-Zip: LAKE CITY, FL 32024

Title: EV
Name: MCCOLLUM, GARY
Address: 3309 SW SR-247
City-St-Zip: LAKE CITY, FL 32024

Title: EEO
Name: STALVEY, ABBY
Address: 3309 SW SR-247
City-St-Zip: LAKE CITY, FL 32024

I hereby 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 all other like empowered.

SIGNATURE: CALVIN C. CREAMER

_____ Electronic Signature of Signing Officer or Director

OWNE

01/05/2010

_____ Date