2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000205

Entity Name: KEMA-ECC, INC.

FILED Feb 04, 2009 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
67 SOUTH BEDFORD ST SUITE 201E BURLINGTON, MA 01803						
Current Mailing Address:				New Mailing Address:		
67 SOUTH BEDFORD STREET SUITE 201E BURLINGTON, MA 01803			67 SOUTH BEDFORD ST SUITE 201E BURLINGTON, MA 01803			
FEI Number: 54-1067916 FEI		FEI Number Applied For ()	FEI Num	umber Not Applicable ()		Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:						
Electronic Signature of Registered Agent						Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	OVERBEEK, HAN	ORD STREET, SUITE 201E		Title: Name: Address: City-St-Zip:	VAN NISPEN,	DFORD STREET, SUITE 201E
Title: Name: Address: City-St-Zip:	GRAHAM, JOHN	oelete ORD STREET, SUITE 201E A 01803		Title: Name: Address: City-St-Zip:	GRAHAM, JOH	DFORD STREET, SUITE 201E
Title: Name: Address: City-St-Zip:	NABUURS, PIER	oelete ORD STREET, SUITE 201E A 01803		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DAUTZENBERG,	ORD STREET, SUITE 201E		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ENOCH, GERD	oelete ORD STREET, SUITE 201E A 01803		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	OVERBEEK, HAN	ORD STREET, SUITE 201E		Title: Name: Address: City-St-Zip:	AARTEN, THIJ	DFORD STREET, SUITE 201E

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: JOHN R. GRAHAM ST 02/04/2009