

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005750

Entity Name: MULTI-COMP, INC.

FILED
Mar 26, 2008
Secretary of State

Current Principal Place of Business:

200 INTERNATIONAL CIRCLE
SUITE 1300
HUNT VALLEY, MD 21030

New Principal Place of Business:

Current Mailing Address:

C/O CORPDIRECT AGENTS//ATTN: KEVIN ROBERTS
515 EAST PARK AVE.
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 54-1843076 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: PCD () Delete
Name: KALVELEGE, JOHN
Address: 200 INTERNATIONAL CIR., STE 1300
City-St-Zip: HUNT VALLEY, MD 21030

Title: VP () Delete
Name: NICKEY, GALEN JR.
Address: 200 INTERNATIONAL CIR., STE 1300
City-St-Zip: HUNT VALLEY, MD 21030

Title: S () Delete
Name: NICKEY, GALEN
Address: 200 INTERNATIONAL CIR., STE 1300
City-St-Zip: HUNT VALLEY, MD 21030

Title: TD () Delete
Name: SALDITCH, IAN
Address: 200 INTERNATIONAL CIR., STE 1300
City-St-Zip: HUNT VALLEY, MD 21030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GALEN NICKEY

VP

03/26/2008

Electronic Signature of Signing Officer or Director

_____ Date