2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# F07000005229

Entity Name: KESSELRING HOLDING CORPORATION

Current Principal Place of Business:

6710 PROFESSIONAL PARKWAY WEST, SUITE 301
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

6710 PROFESSIONAL PARKWAY WEST, SUITE 301
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 20-4838580 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOORE, JOHN L ESQ
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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:	DCEO	( ) Delete
Name:	BADERTSCHER, DOUGLAS P	
Address:	6710 PROFESSIONAL PARKWAY WEST, SUITE 301	
City-St-Zip:	SARASOTA, FL 34240	
Title:	SC	( ) Delete
Name:	WILDES, CLIFFORD H	
Address:	6710 PROFESSIONAL PARKWAY WEST, SUITE 301	
City-St-Zip:	SARASOTA, FL 34240	
Title:	TCFO	( ) Delete
Name:	CAMISA, LAURA	
Address:	6710 PROFESSIONAL PARKWAY WEST, SUITE 301	
City-St-Zip:	SARASOTA, FL 34240	
Title:	D	( ) Delete
Name:	CRAIG, KENNETH C	
Address:	6710 PROFESSIONAL PARKWAY WEST, SUITE 301	
City-St-Zip:	SARASOTA, FL 34240	
Title:	D	( ) Delete
Name:	KING, GARY	
Address:	602 WEST VALLEY MALL BOULEVARD	
City-St-Zip:	UNION GAP, WA 98901	
Title:	D	( ) Delete
Name:	SANDIFER, VIRGIL L JR	
Address:	2037 HIGHWAY 82 EAST	
City-St-Zip:	GREENVILLE, MS 38703	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	C	(X) Change ( ) Addition
Name:	ECKERLE, ALLEN	
Address:	6710 PROFESSIONAL PARKWAY WEST, SUITE 301	
City-St-Zip:	SARASOTA, FL 34240	
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: ALLEN ECKERLE C 01/08/2008

Electronic Signature of Signing Officer or Director — Date