

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002354

FILED  
Feb 07, 2011  
Secretary of State

**Entity Name:** CHESAPEAKE CONTAINMENT SYSTEMS, INC.

**Current Principal Place of Business:**

4622 WILMSLOW ROAD  
BALTIMORE, MD 21210

**New Principal Place of Business:**

352 EARLS ROAD  
MIDDLE RIVER, MD 21220

**Current Mailing Address:**

352 EARLS RD.  
MIDDLE RIVER, MD 21220

**New Mailing Address:**

**FEI Number:** 20-8372336      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR SUITE 4  
WESTON, FL 33331 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KAMP, RYAN C  
Address: 352 EARLS ROAD  
City-St-Zip: MIDDLE RIVER, MD 21220

Title: V  
Name: GARLAND, MATTHEW  
Address: 352 EARLS ROAD  
City-St-Zip: MIDDLE RIVER, MD 21220

Title: ST  
Name: KAMP, LARISA  
Address: 352 EARLS ROAD  
City-St-Zip: MIDDLE RIVER, MD 21220

Title: V  
Name: CLARK, RYAN P  
Address: 352 EARLS ROAD  
City-St-Zip: MIDDLE RIVER, MD 21220

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: RYAN C KAMP

P

02/07/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date