

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001881

Entity Name: CALCIUM SILICATE CORP., INC.

FILED
Aug 31, 2009
Secretary of State

Current Principal Place of Business:

601 WATSON FARM RD.
LAKE HARBOR, FL 33459

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 405
LAKE HARBOR, FL 33459

New Mailing Address:

FEI Number: 62-1434995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARK C. ELIZER
15550 BELLANCA LANE
WELLINGTON, FL 33414 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: PD () Delete
Name: ELIZER, MARK C
Address: 15550 BELLANCA LANE
City-St-Zip: WELLINGTON, FL 33414

Title: VD () Delete
Name: CONZELMAN, JOSPEH H
Address: 500 OFFICE PARK CIRCLE SUITE 200
City-St-Zip: BIRMINGHAM, AL 35223

Title: SD () Delete
Name: CONSTANTINO, THOMAS F
Address: 19125 62ND PLACE
City-St-Zip: LIVE OAK, FL 32060

Title: TD () Delete
Name: FOGEL, RONALD L
Address: 221 PARADISE POINT LN.
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: MARK C. ELIZER

PRES

08/31/2009

Electronic Signature of Signing Officer or Director

Date