

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004809

FILED
Jan 23, 2007
Secretary of State

Entity Name: EDWARDS AND KELCEY TECHNOLOGY, INC.

Current Principal Place of Business:

299 MADISON AVENUE
P.O. BOX 1936
MORRISTOWN, NJ 07962 US

New Principal Place of Business:

299 MADISON AVENUE
MORRISTOWN, NJ 07962 US

Current Mailing Address:

299 MADISON AVENUE
P.O. BOX 1936
MORRISTOWN, NJ 07962 US

New Mailing Address:

299 MADISON AVENUE
MORRISTOWN, NJ 07962 US

FEI Number: 22-3514442 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: C () Delete
Name: MCMAHON, KEVIN J
Address: 299 MADISON AVENUE
City-St-Zip: MORRISTOWN, NJ 07962

Title: S () Delete
Name: REFINSKI, ELIZABETH A
Address: 299 MADISON AVENUE
City-St-Zip: MORRISTOWN, NJ 07962

Title: T () Delete
Name: BARRY, THOMAS
Address: 299 MADISON AVENUE
City-St-Zip: MORRISTOWN, NJ 07962

Title: V () Delete
Name: STILES, JEFFREY
Address: 299 MADISON AVE
City-St-Zip: MORRISTOWN, NJ 07960

Title: VP () Delete
Name: PILLA, MARK J
Address: 529 MAIN STREET
City-St-Zip: BOSTON, MA 02129

Title: V () Delete
Name: TANSEL, RICHARD M
Address: 299 MADISON AVE
City-St-Zip: MORRISTOWN, NJ 07962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: THORNHILL, DAVID
Address: 299 MADISON AVENUE
City-St-Zip: MORRISTOWN, NJ 07962

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 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: KEVIN J MCMAHON

CEO

01/23/2007

Electronic Signature of Signing Officer or Director

_____ Date