

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000048449

Entity Name: KELMAG MANAGEMENT INC.

FILED
Apr 14, 2008
Secretary of State

Current Principal Place of Business:

8151 TREELET CT.
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

13009 LAKE KARL DR.
HUDSON, FL 34669 US

Current Mailing Address:

8151 TREELET CT
NEW PORT RICHEY, FL 34653 US

New Mailing Address:

13009 LAKE KARL DR.
HUDSON, FL 34669 US

FEI Number: 56-2364124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COOGAN, DAVID G
2599 DOLLY BAY DRIVE
#209
PALM HARBOR, FL 34684 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: P () Delete
Name: COOGAN, DAVID G
Address: 29 DOLLY BAY DRIVE, #209
City-St-Zip: PALM HARBOR, FL 34684 US

Title: VP () Delete
Name: DAMIANI, CHRISTOPHER L
Address: 11125 LAKEVIEW DR.
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: T () Delete
Name: DAMIANI, JOSEPH C
Address: 2624 HAWK ROOST CT
City-St-Zip: HOLIDAY, FL 34691 US

Title: S () Delete
Name: WILLEY, KATHRYN M
Address: 2599 DOLLY BAY DRIVE, #209
City-St-Zip: PALM HARBOR, FL 34684 US

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: DAVID G. COOGAN

P

04/14/2008

Electronic Signature of Signing Officer or Director

Date