2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2009
Secretary of State

DOCUMENT# P08000035351

Entity Name: KELMAR FOOD ENTERPRISES, INC.

Current Principal Place of Business:

7540 WIMPLOE DR.
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

17669 DALE MABRY HWY. NORTH
LUTZ, FL 33548

Current Mailing Address:

7540 WIMPLOE DR.
NEW PORT RICHEY, FL 34655

New Mailing Address:

17669 DALE MABRY HWY. NORTH
LUTZ, FL 33548

FEI Number: 26-2218916 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARREN, TOM
202 S. 22 ST., STE. 214
TAMPA, FL 33605 US

Name and Address of New Registered Agent:

KELVER, BENJAMIN D
7540 WIMPOLE DRIVE
NEW PORT RICHEY, FL 34655 US

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: BENJAMIN D KELVER 04/18/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: KELVER, BENJAMIN D.
Address: 7540 WIMPLOE DR.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: DVS ( ) Delete
Name: MARCHICA, JOSEPH
Address: 7540 WIMPLOE DR.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change ( ) Addition
Name: MARCHICA, JOSEPH
Address: 5406 SWALLOW DRIVE
City-St-Zip: LAND O' LAKES, FL 34639

Title: S ( ) Change (X) Addition
Name: COSTELLO, LISA A
Address: 11450 CRICKET CHIRP LOOP
City-St-Zip: LAND O' LAKES, FL 34638

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: BENJAMIN D KELVER DPT 04/18/2009
Electronic Signature of Signing Officer or Director Date