

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29831

Entity Name: ST. KILLIAN IMPORTING CO., INC.

FILED
Feb 03, 2008
Secretary of State

Current Principal Place of Business:

ELDER AVE EXT.
KINGSTON, MA 02364

New Principal Place of Business:

Current Mailing Address:

P.O. BOX K
KINGSTON, MA 02364

New Mailing Address:

FEI Number: 04-3059660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL DISTRIBUTING CO
4901 SAYARESE DR
TAMPA, FL 33634 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: HAGUE, HENRY R., JR.,
Address: 38 SANDERSON DR.
City-St-Zip: PLYMOUTH, MA

Title: C () Delete
Name: SHEEHAN, MARGARET E.
Address: 4 ATHERTON RD.
City-St-Zip: WINCHESTER, MA

Title: T () Delete
Name: MACDONALD, DOUGLAS S.,
Address: POPPLE BOTTOM RD.
City-St-Zip: SANDWICH, MA

Title: VP () Delete
Name: SHEENAN, CHRISTOPHER
Address: 183 WASHINGTON ST
City-St-Zip: DUXBURY, MA

Title: D () Delete
Name: SHEEHAN, GERALD V
Address: ELDER AVE
City-St-Zip: KINGSTON, MA 02364

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: C (X) Change () Addition
Name: SHEEHAN, MARGARET E.
Address: 732 MAIN ST.
City-St-Zip: WILLIAMSTOWN, MA

Title: T (X) Change () Addition
Name: MACDONALD, DOUGLAS S.,
Address: 192 COUNTY CLUB WAY
City-St-Zip: KINGSTON, MA 02360

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: DOUGLAS S. MACDONALD

TRES

02/03/2008

Electronic Signature of Signing Officer or Director

Date