

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000003039

Entity Name: MAGNUM SYSTEMS, INC.

FILED
Jul 12, 2008
Secretary of State

Current Principal Place of Business:

1980 SW CLEVEL ROAD
ARCADIA, FL 34266 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2350
ARCADIA, FL 34265

New Mailing Address:

FEI Number: 65-0373927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, JOHN W
1980 SW CLEVEL ROAD
ARCADIA, FL 34266 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: EDWARDS, JOHN W
Address: 1980 S.W. CLEVEL ROAD
City-St-Zip: ARCADIA, FL 34266

Title: EVS () Delete
Name: EDWARD, KAREN P
Address: 1980 SW CLEVEL ROAD
City-St-Zip: ARCADIA, FL 34266

Title: TD () Delete
Name: EDWARD, KAREN P
Address: 1980 SW CLEVEL ROAD
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: EDWARDS, JOHN W
Address: 1980 S.W. CLEVEL ROAD
City-St-Zip: ARCADIA, FL 34266

Title: SEC (X) Change () Addition
Name: PEAK, KAREN
Address: 1980 SW CLEVEL RD
City-St-Zip: ARCADIA, FL 34266

Title: TRES (X) Change () Addition
Name: PEAK, KAREN
Address: 1980 SW CLEVEL ROAD
City-St-Zip: ARCADIA, FL 34266

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: JOHN W EDWARDS

PRES

07/12/2008

Electronic Signature of Signing Officer or Director

_____ Date