

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000059802

FILED
Apr 08, 2009
Secretary of State

Entity Name: KEMP ENTERTAINMENT, INC.

Current Principal Place of Business:

4721 E. MOODY BLVD.,
101
BUNNELL, FL 32110 US

New Principal Place of Business:

14 PALM HARBOR VILLAGE WAY
PALM COAST, FL 32137 US

Current Mailing Address:

4721 E. MOODY BLVD
101
BUNNELL, FL 32110 US

New Mailing Address:

14 PALM HARBOR VILLAGE WAY
PALM COAST, FL 32137 US

FEI Number: 98-0136276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KJELL LARSSON
4721 E. MOODY BLVD
UNIT 101
BUNNELL, FL 32110 US

Name and Address of New Registered Agent:

KJELL LARSSON
14 PALM HARBOR VILLAGE WAY
PALM COAST, FL 32137 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: KJELL LARSSON

04/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: DRAKELID, STEFAN R
Address: SNACKVAGEN 5
City-St-Zip: S-185 34 VAXHOLM, S SWEDEN S

Title: P () Delete
Name: LARSSON, KJELL
Address: 99 COVINGTON LN
City-St-Zip: PALM COAST, FL 32137 OC

Title: D () Delete
Name: LARSSON, EVA
Address: 99 COVINGTON LN
City-St-Zip: PALM COAST, FL 32137

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:

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: KJELL LARSSON

P

04/08/2009

Electronic Signature of Signing Officer or Director

Date