

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000090789

Entity Name: KALO MANAGEMENT, INC.

FILED  
Feb 16, 2006  
Secretary of State

## Current Principal Place of Business:

2435 US HWY N 27  
DAVENPORT, FL

## New Principal Place of Business:

2110-B BOCA RATON DR., STE. 102  
AUSTIN, TX 78747

## Current Mailing Address:

P.O. BOX 9087  
WINTER HAVEN, FL 33883

## New Mailing Address:

FEI Number: 59-3473098

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRICE, R. GARY  
525 POPE AVE NW  
WINTER HAVEN, FL 33881 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: PS ( ) Delete  
Name: KALOGRIDIS, MITCHELL DAVIS  
Address: 4501 GRAND CYPRESS DRIVE  
City-St-Zip: AUSTIN, TX 78747

Title: S ( ) Delete  
Name: PRICE, R. GARY  
Address: 525 POPE AVENUE  
City-St-Zip: WINTER HAVEN, FL 33881

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: KALOGRIDIS, MITCHELL DAVIS  
Address: 2110-B BOCA RATON DR., STE. 102  
City-St-Zip: AUSTIN, TX 78747

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MITCHELL DAVIS KALOGRIDIS

PS

02/16/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date