

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S31926

Entity Name: KELSON DRUG, INC.

FILED
Apr 13, 2007
Secretary of State

Current Principal Place of Business:

3008 JEFFERSON ST
SUITE B
MARIANNA, FL 324469318

Current Mailing Address:

3008 JEFFERSON ST
SUITE B
MARIANNA, FL 324469318

FEI Number: 62-1457881

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

3008 JEFFERSON ST
SUITE B
MARIANNA, FL 324469318 US

New Mailing Address:

3008 JEFFERSON ST
SUITE B
MARIANNA, FL 324469318 US

Name and Address of Current Registered Agent:

OSWALD, VIRGIL D JR
4582 FOREST PARK DR.
MARIANNA, FL 32446 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: DP () Delete
Name: TEW, FRANCIS C
Address: 2948 WESTMANOR DRIVE
City-St-Zip: MARIANNA, FL 32446

Title: DV () Delete
Name: OSWALD, VIRGIL D
Address: 4582 FOREST PARK DRIVE
City-St-Zip: MARIANNA, FL 32446

Title: DST () Delete
Name: WATSON, LUCIEN W JR
Address: 4384 KELSON AV.
City-St-Zip: MARIANNA, FL 32446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: OSWALD, VIRGIL D JR
Address: 4582 FOREST PARK DRIVE
City-St-Zip: MARIANNA, FL 32446

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: VIRGIL D. OSWALD, JR

DV

04/13/2007

Electronic Signature of Signing Officer or Director

_____ Date