

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000095006

**Entity Name:** KELLY TECHNOLOGY INC.

**Current Principal Place of Business:**

1000 SOUTH COLLIER BLVD  
UNIT 304  
MARCO ISLAND, FL 34145

**Current Mailing Address:**

P.O. BOX 2075  
MARCO ISLAND, FL 34146

**FEI Number:** 46-1377331

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KELLY, HOWARD N  
1000 SOUTH COLLIER BLVD  
UNIT 304  
MARCO ISLAND, FL 34145 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name KELLY, HOWARD N  
Address 1000 SOUTH COLLIER BLVD, UNIT 304  
City-State-Zip: MARCO ISLAND FL 34145

Title VP  
Name KELLY, JASON H  
Address 55 DAVID TERRACE  
APT 26  
City-State-Zip: NORWOOD MA 02062

Title S  
Name KELLY, JANICE M  
Address 1000 SOUTH COLLIER BLVD, UNIT 304  
City-State-Zip: MARCO ISLAND FL 34145

Title T  
Name KELLY, JUSTINE L  
Address 1934 ROCK ST, APT 6  
City-State-Zip: MOUNTAINVIEW CA 94043

*I hereby 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 all other like empowered.*

**SIGNATURE:** HOWARD N KELLY

**PRESIDENT**

**01/26/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date