



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Foreign Business Corporation  
Annual Report**

Filing Period: January 1 - March 1

*In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2011

**1. Corporate ID No.** 000509946

**2. Name of Corporation** Key Impact Sales & Systems, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 1701 CROSSROADS DRIVE

City or Town: ODENTON

State: MD

Zip: 21113

Country: USA

**4. Business Phone No.**

410-381-1239

**5. State of Incorporation**

State: MD

**6. Brief Description of the Character of Business Conducted in Rhode Island**

TO BROKER THE SALES OF FOOD, FOOD PRODUCTS, BEVERAGES AND RESTAURANT SUPPLIES

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	DANIEL T CASSIDY	95 CONNECTICUT DRIVE BURLINGTON, NJ 08016 USA
TREASURER	KATHLEEN MOOY	1701 CROSSROADS DR ODENTON, MD 21113 USA
SECRETARY	DIANE JAMERSON	95 CONNECTICUT DR BURLINGTON , NJ 08016 USA
COO	ERIC FROST	1701 CROSSROADS DR ODENTON, MD 21113 USA
DIRECTOR	ROBERT BROBECK	1701 CROSSROADS DR ODENTON, MD 21113 USA
DIRECTOR	RICHARD GEORGE	1701 CROSSROADS DR ODENTON, MD 21113 USA
DIRECTOR	MICHAEL HASTINGS	1701 CROSSROADS DR ODENTON, MD 21113 USA
DIRECTOR	MARK CHANEY	1701 CROSSROADS DR ODENTON, MD 21113 USA
DIRECTOR	JASON BRENNAN	1701 CROSSROADS DR ODENTON, MD 21113 USA
DIRECTOR	GARY SOBKOWIAK	1701 CROSSROADS DR ODENTON, MD 21113 USA
DIRECTOR	MARK BAUM	1701 CROSSROADS DR ODENTON, MD 21113 USA

#### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.00	1,000,000.00	665387

**9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.**

**Signed this 27 Day of February, 2011 at 11:50:18 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By DAWN DEMOSS  
Signature of Authorized Representative of the Corporation

CONTROLLER  
Title

**This report cannot be accepted for filing if an officer has executed the form and he/she is not**

**listed in section 7.**

Form No. 630  
Revised 09/07

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