## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000026987

Entity Name: K M PRECAST AND SEPTIC SERVICE, INC.

FILED Jul 05, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	RDNER DRIVE FL 34109	#101			
Current Mailing Address:			New Mailing Address	s:	
	RDNER DRIVE FL 34109	#101			
FEI Number	r: 04-3807180	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and Address of	f New Registered Agent:	
7701 GAR	MERY, KELLY RDNER DRIVE FL 34109 L	#101			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU					
SIGNATU	RE:	ic Signature of Registered Ag	ent	Date	
In accordar	RE: Electron	3(2)(b), F.S., the corporation did n		Date	
In accordar Election Ca	RE: Electron	3(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ).	ot receive the prior notice.	Date ES TO OFFICERS AND DIRECTORS	
In accordar Election Ca	RE: Electron nce with s. 607.19 Impaign Financin S AND DIREC	3(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ). TORS: Delete /, KELLY R R DRIVE #101	ot receive the prior notice.		
In accordar Election Ca <b>OFFICER</b> Title: Name: Address:	Electron The second of the sec	3(2)(b), F.S., the corporation did ng Trust Fund Contribution ( ). TORS: Delete (, KELLY R R DRIVE #101 4109 Delete (, BRENDA G R DRIVE #101	ot receive the prior notice.  ADDITIONS/CHANGI  Title:  Name:  Address:	ES TO OFFICERS AND DIRECTORS	

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: KELLY MONTGOMERY PD 07/05/2006