## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F63077

**Entity Name: KIBLER CHEMICAL CORPORATION** 

FILED Jan 06, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1610 ORANGE AVE ST CLOUD, FL 34769 US

**Current Mailing Address: New Mailing Address:** 

1610 ORANGE AVE ST CLOUD, FL 34769 US

FEI Number: 59-2152729 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KIBLER, CONNIE L 1856 SAILFISH CT KISSIMMEE, FL 34744 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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition KIBLER, CHARLES B, KIBLER, CHARLES B, Name: Name:

1856 SAILFISH CT 1856 SAILFISH CT Address: Address: KISSIMMEE, FL City-St-Zip: City-St-Zip: KISSIMMEE, FL 34744

Title: STD Title: STD () Delete (X) Change ( ) Addition

KIBLER, CONNIE. Name: Name: KIBLER, CONNIE. 1856 SAILFISH CT 1856 SAILFISH CT Address: Address: KISSIMMEE, FL KISSIMMEE, FL 34744 City-St-Zip: City-St-Zip:

Title: Title: VPD VPD ( ) Delete (X) Change ( ) Addition

WEISS, GARY WEISS, GARY Name: Name: 2949 CIALLELA PASS 2949 CIALLELA PASS Address: Address: City-St-Zip: ST CLOUD, FL City-St-Zip: ST CLOUD, FL 34771

Title: **VPD** ( ) Delete Title: VPD (X) Change ( ) Addition

WECK, KELLY WECK, KELLY Name: Name: Address: 14128 NELL DRIVE Address: 3016 DIAMOND LANE City-St-Zip: ORLANDO, FL 32832 City-St-Zip: ST. CLOUD, FL 34771

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: CONNIE L. KIBLER STD 01/06/2006