

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H71056

FILED
Apr 07, 2007
Secretary of State

Entity Name: K & M BUILDERS OF THE KEYS, INC.

Current Principal Place of Business:

31 PALM DR
P.O. BOX 1669
KEY LARGO, FL 33037

New Principal Place of Business:

31 PALM DR
KEY LARGO, FL 33037

Current Mailing Address:

31 PALM DR
P.O. BOX 1669
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 59-2652754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KACZKA, CHESTER C.
212 LIGNUMVITAE DR
KEY LARGO, FL 33037 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: P () Delete
Name: KACZKA, CHESTER,
Address: 212 LIGNUMVITAE DR
City-St-Zip: KEY LARGO, FL 33037

Title: S () Delete
Name: KACZKA, CHESTER,
Address: 212 LIGNUMVITAE DR
City-St-Zip: KEY LARGO, FL 33037

Title: VP () Delete
Name: KACZKA, CHESTER,
Address: 212 LIGNUMVITAE DR
City-St-Zip: KEY LARGO, FL 33037

Title: T () Delete
Name: GRAYSON, STEPHEN
Address: 436 HIGHLANDS LAKE DR
City-St-Zip: LAKE PLACID, FL 33582

Title: VP () Delete
Name: MORSE, GARY K
Address: 549 PLANTE ST
City-St-Zip: KEY LARGO, FL 33037 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: CHESTER C KACZKA

P

04/07/2007

Electronic Signature of Signing Officer or Director

_____ Date