2006 FOR PROFIT CORPORATION

Apr 05, 2006 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # J74773** 04-05-2006 90131 045 ***150.00 1. Entity Name KERNS CONSTRUCTION, INC. Principal Place of Business Mailing Address \$002. 2720 WINDSOR AVE PO BOX 8146 US : . ft. WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407 2. Principal Place of Business 3. Mailing Address 1305 West 53rd Street 1305 West 53rd Street Suite, Apt. #, etc. Suite, Apt. #, etc. 01102006 CR2E034 (11/05) Suite #1 Suite #1 City & State City & State 4. FEI Number Applied For 59-2808152 Mangonia Park, FL <u>Mangonia Park, FL</u> Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired \Box 33407 33407 Palm Beach Palm Beach 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KERNS, ROBERT DENNIS Street Address (P.O. Box Number is Not Acceptable) 9025 CYPRESS HOLLOW DRIVE PALM BEACH GARDENS, FL 33418 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. 1/23/06 Robert Dennis Kerns-Chairman Sgreture, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change Addition NAME KERNS, ROBERT DENNIS NAME STREET ADDRESS 9025 CYPRESS HOLLOW DRIVE STREET ADDRESS CITY-ST-ZIP PALM BEACH GARDENS, FL 33418 CITY-ST-ZIP ST TITLE ☐ Delete TITLE ☐ Change ☐ Addition KERNS, KEVIN DENNIS NAME NAME STREET ADDRESS 465 LOS ALTOS ROAD STREET ADDRESS CITY-ST-7P PALM SPRINGS, FL 33461 CITY-ST-ZIP TITLE TITLE Detete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Kalut J 1/28/06 Robert Dennis Kerns
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR