

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L71091

FILED  
Apr 29, 2006  
Secretary of State

**Entity Name:** KRIEGER AND KRIEGER PROFESSIONAL CONVERSATIONS SPECIALISTS, INC.

**Current Principal Place of Business:**

8230 NORTH 45TH WAY  
PBG, FL  
PALM BEACH GARDENS, FL 33418 US

**New Principal Place of Business:**

**Current Mailing Address:**

8230 N 45TH WAY  
PBG, FL  
PALM BEACH GARDENS, FL 33418 US

**New Mailing Address:**

**FEI Number:** 65-0191595      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KRIEGER, RHONDA M.  
8230 N. 45TH WAY  
PALM BEACH GARDENS, FL 33418 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: DPT ( ) Delete  
Name: KRIEGER, RHONDA M.  
Address: 8230 N. 45TH WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: V ( ) Delete  
Name: KRIEGER, JOHANNA M.,  
Address: 3489 ROSS LN  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S ( ) Delete  
Name: RUSSELL, JANICE K.,  
Address: 5680 FOUNTAIN LAKE CIRCLE, #211  
City-St-Zip: BRADENTON, FL 34207 US

Title: M ( ) Delete  
Name: KRIEGER, ALAN T.,  
Address: 3489 ROSS LN  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: C ( ) Delete  
Name: KRIEGER, DANIEL G.  
Address: 4128 DALE ROAD  
City-St-Zip: WEST PALM BEACH, FL 33406 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: S (X) Change ( ) Addition  
Name: RUSSELL, JANICE K.,  
Address: 1091 PANACEA BLVD., #203  
City-St-Zip: NORTH PORT, FL., FL 34289 US

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: RHONDA MARIE KRIEGER, MS/HS & MSW

DPT

04/29/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date