2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000004297

City-St-Zip:

PALM BAY, FL 32909

Entity Name: K & B FENCE COMPANY, INC

FILED Apr 25, 2005 Secretary of State

Entity Nan	ne: K&BFE	NCE COMPANY, INC.			
Current Pr	rincipal Place	of Business:	New Principal Place of	New Principal Place of Business:	
	RPRISE AVE.				
SUITE A PALM BAY	, FL 32909				
Current M	ailing Addres	ss:	New Mailing Address:	New Mailing Address:	
	RPRISE AVE.				
SUITE A PALM BAY	, FL 32909				
FEI Number:	59-3622551	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
RICHEY, JAMES H ESQ. 1600 SARNO RD., SUITE 4 MELBOURNE, FL 32935 US			707 WEST EAU GALLIE	RICHEY, JAMES H ESQ. 707 WEST EAU GALLIE BLVD. MELBOURNE, FL 32935 US	
The above in the State		submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: JAMES H RICHEY				04/25/2005	
	Electror	nic Signature of Registered Age	ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BRODERICK, F	SE AVE., SUITE A	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	BRODERICK,	SE AVE., SUITE A	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address:	STONE, DUSTI) Delete N SE AVE SUITE A	Title: (Name: Address:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: PAMELA S BRODERICK D 04/25/2005