


2005 FOR PROFIT CORPORATION ANNUAL REPORT


550

DOCUMENT # P00000036580		
1. Entity Name KRENKEL PROPERTIES, INC.		

Principal Place of Business 164 BLUE LUPINE WAY SUITE 400 SANTA ROSA BEACH, FL 32459	Mailing Address 319 DEERFIELD DR. DESTIN, FL 32541
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FILED
05 MAY -5 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05022005 No Chg-P CR2E034 (10/03)

4. FEI Number 13-4214539	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KRENKEL, ANDY JR 319 DEERFIELD DR. DESTIN, FL 32541	
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KRENKEL, ANDY JR. 319 DEERFIELD DR. DESTIN, FL 32541
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5/305 8006229156

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE: Andy Krenkel Date: 5-30-05 Daytime Phone #: 8006229156

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR