

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000117297

Entity Name: K & M ACCENT BUILDERS, INC.

FILED
Jun 29, 2005
Secretary of State

Current Principal Place of Business:

509 KELLY ST.
DESTIN, FL 32541

New Principal Place of Business:

505-H MOUNTAIN DR.
DESTIN, FL 32541

Current Mailing Address:

509 KELLY ST.
DESTIN, FL 32541

New Mailing Address:

505-H MOUNTAIN DR.
DESTIN, FL 32541

FEI Number: 59-3690973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHNSON, KEITH
509 KELLY ST.
DESTIN, FL 32541 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: SPICER, MICHAEL
Address: 3808 MISTY WAY
City-St-Zip: DESTIN, FL 32541

Title: V () Delete
Name: JOHNSON, KEITH
Address: 509 KELLY ST.
City-St-Zip: DESTIN, FL 32541

Title: S () Delete
Name: JOHNSON, TINA
Address: 509 KELLY ST.
City-St-Zip: DESTIN, FL 32541

Title: T () Delete
Name: JOHNSON, TINA
Address: 509 KELLY ST.
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SPICER, MICHAEL
Address: 505-H MOUNTAIN DR.
City-St-Zip: DESTIN, FL 32541

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 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.

SIGNATURE: KEITH JOHNSON

V

06/29/2005

Electronic Signature of Signing Officer or Director

Date