

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90192 003 ***150.00

DOCUMENT # P01000003914

1. Entity Name
KOLZE ENTERPRISES, INC.



Principal Place of Business
7212 - 41ST AVE. E.
BRADENTON, FL 34208

Mailing Address
7212 - 41ST AVE. E.
BRADENTON, FL 34208



04042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FCI Number
65-1072199

Approved For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KOLZE, SUSAN M
7212 - 41ST AVE. E.
BRADENTON, FL 34208

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity swears 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 qualifications of registered agent.

SIGNATURE _____

Signature of individual who is changing registered office or registered agent.

(If not, signature of Agent/Manager/Secretary or other officer.)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
D
KOLZE, SUSAN M
7212 - 41ST AVE. E.
BRADENTON, FL 34208

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
D
KOLZE, RALPH M III
7212 - 41ST AVE. E.
BRADENTON, FL 34208

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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IN THIS SPACE**

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 a other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Susan M Kolze
Director

4-25-06