

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90151 049 ***150.00

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1. Entity Name
K & T CARPENTRY INC.



Principal Place of Business
**1012 SW 35 ST
CAPE CORAL, FL 33914-8266**

Mailing Address
**1012 SW 35 ST
CAPE CORAL, FL 33914-8266**

20057752



04252005 No Chg-P CR2E034 (10/03)

4. FEI Number
52-2264751

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MC PHAIL, KEITH
1012 SW 35TH ST
CAPE CORAL, FL 33914**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution: ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MCPHAIL, KEITH
STREET ADDRESS 519 SE 15TH ST.
CITY-ST-ZIP CAPE CORAL, FL 33990

TITLE **VR**
NAME **TARYA MCPHAIL**
STREET ADDRESS **1012 SW 35 ST.**
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE
NAME
STREET ADDRESS
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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 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: *Keith McPhail*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/05
Date

Daytime Phone #