

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000068115			
1. Entity Name MICHAEL A. KLEINRICHERT, P.A.			
Principal Place of Business 115 WATERVIEW WAY ROYAL PALM BEACH, FL 33411		Mailing Address 115 WATERVIEW WAY ROYAL PALM BEACH, FL 33411	
DO NOT WRITE IN THIS SPACE			
		04232005 No Chg-P CR2E034 (10/03)	
		4. FEI Number 43-1985504	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 KLEINRICHERT, MICHAEL A 115 WATERVIEW WAY ROYAL PALM BEACH, FL 33411			
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 _____ <small>Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLEINRICHERT, MICHAEL A 115 WATERVIEW WAY ROYAL PALM BEACH, FL 33411		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLEINRICHERT, KAREN E 115 WATERVIEW WAY ROYAL PALM BEACH, FL 33411		
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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 of it; I am 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: 		4/28/05 561-784-7774 Date Daytime Phone #	