

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000079893

Entity Name: K. & B. DESCLEFS, INC.

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

3740 BEACH BOULEVARD
SUITE 201-A
JACKSONVILLE, FL 32207

New Principal Place of Business:

231 NORTH LAURA STREET
JACKSONVILLE, FL 32202

Current Mailing Address:

3740 BEACH BOULEVARD
SUITE 201-A
JACKSONVILLE, FL 32207

New Mailing Address:

231 NORTH LAURA STREET
JACKSONVILLE, FL 32202

FEI Number: 43-2024421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FALCK, WILLIAM E
3740 BEACH BOULEVARD
SUITE 201-A
JACKSONVILLE, FL 32207 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: PD () Delete
Name: DESCLEFS, BENOIT
Address: 1501 MAYFAIR RD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: STD () Delete
Name: DESCLEFS, KATHY
Address: 1501 MAYFAIR RD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP () Delete
Name: FALCK, WILLIAM E ESQ
Address: 4851 RIVER BASIN DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 exemption stated 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 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: WILLIAM E. FALCK

VP

04/25/2008

Electronic Signature of Signing Officer or Director

_____ Date