

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000097905

1. Entity Name KEITH REEVES CONSTRUCTION, INC.



FILED May 01, 2006 08:00 Al Secretary of State

Principal Place of Business

7117 ASH STREET ZEPHYRHILLS, FL 33541 Mailing Address

7117 ASH STREET ZEPHYRHILLS, FL 33541



DO NOT WRITE IN THIS SPACE

No Chg-P 05112006

CR2E034 (11/05)

4. FEI Number 20-0217355 Applied For Not Applicable

5. Certificate of Status Desired

5-11-06

\$8.75 Additional Fee Required

Daylime Phone #

6. Name and Address of Current Registered Agent

NELSON, SCOTT F 200 SOUTH HOOVER BOULEVARD BUILDING 201 - SUITE 140 TAMPA, FL 33609

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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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 Due by September 6, 2006 9. Election Campaign Finant Trust Fund Contribution.			ing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DURE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD REEVES, BERNARD K 7117 ASH STREET ZEPHYRHILLS, FL 33541		U00000554586 05/15/06-80053-026 158.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-SI-ZIP					
12. I hereby certify that the information supplied with this filling 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 cath; 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 appress, with all other like empowered.					

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR