## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000109714

Entity Name: KLICE & SMITH CONSTRUCTION, INC.

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

911 NORTH FEDERAL HIGHWAY, #B-1 200 WOODLAND ROAD LAKE WORTH, FL 33460 PALM SPRINGS, FL 33461

Current Mailing Address: New Mailing Address:

P.O. BOX 17814 WEST PALM BEACH, FL 33416

FEI Number: 30-0207875 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KLICE, MARY A
911 NORTH FEDERAL HIGHWAY, #B-1
LAKE WORTH, FL 33460 US

KLICE, MARY A
200 WOODLAND ROAD
PALM SPRINGS, FL 33461 US

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

04/25/2005

Title: PSTD ( ) Delete Title: PSTD (X) Change ( ) Addition

Name: KLICE, MARY A Name: KLICE, MARY A
Address: 911 NORTH FEDERAL HIGHWAY, #A-5 Address: 200 WOODLAND ROAD

Address: 911 NORTH FEDERAL HIGHWAY, #A-5 Address: 200 WOODLAND ROAD
City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: PALM SPRINGS, FL 33461

Title: VD () Delete Title: VD (X) Change () Addition

Name: SMITH, LEE Name: SMITH, LEE

Address: 1654 ROYAL FOREST COURT Address: 277 WOODLAND ROAD City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: PALMSPRINGS, FL 33461

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARY KLICE PSTD 04/25/2005