

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010296

Entity Name: KLUPPY HOMES, INC

FILED
Jan 03, 2005
Secretary of State

Current Principal Place of Business:

1222 RUSSELL DR.
OCOE, FL 34761 US

New Principal Place of Business:

Current Mailing Address:

1222 RUSSELL DR.
OCOE, FL 34761 US

New Mailing Address:

FEI Number: 20-0582682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLUPENGER, WILLIAM C
1222 RUSSELL DR.
OCOE, FL 34761 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: CEO () Delete
Name: KLUPENGER, MICHAEL R
Address: 11427 BAIRD ROAD
City-St-Zip: AMHERST, OH 44001 US

Title: P () Delete
Name: KLUPENGER, NICOLE E
Address: 1222 RUSSELL DRIVE
City-St-Zip: OCOE, FL 34761 US

Title: VP () Delete
Name: KLUPENGER, WILLIAM C, .
Address: 1222 RUSSELL DRIVE
City-St-Zip: OCOE, FL 34761 US

Title: SEC () Delete
Name: KLUPENGER, SHARON A
Address: 11427 BAIRD ROAD
City-St-Zip: OCOE, FL 44001 US

Title: TRS () Delete
Name: KLUPENGER, SHARON H
Address: 2068 LEANNE COURT
City-St-Zip: WINTER PARK, FL 32792 US

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: LOGAN, CHARLES
Address: 2333 OLD DIXIE HWY
City-St-Zip: APOPKA, FL 32703 US

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: MICHAEL KLUPENGER

CEO

01/03/2005

Electronic Signature of Signing Officer or Director

Date