2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: 🚣

## Aug 11, 2005 8:00 am Secretary of State DOCUMENT # P04000060633 08-11-2005 90001 032 \*\*\*150.00 KLW CONCRETE PUMPING, INC. Principal Place of Business Mailing Address 11929 CORINNE LEE COURT 11929 CORINNE LEE COURT #103 FORT MYERS FL 33907 FORT MYERS FL 33907 2. Principal Place of Business 3. Mailing Address ame 1929-103 CoridNE (ec ct Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE -CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 0 -Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEAVER, KEVIN L Street Address (AO. Box Number is Not Acceptable) 11929 CÓRINNE LEE COURT #103 FORT MYERS FL 33907 Zip Code City 8. The above named epity 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 (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Addition TITLE Delete TITLE NAME WEAVER, KEVIN L NAME 11929-103 CORINNE LEE COURT STREET ADDRESS STREET ADDRESS CITY - ST - ZIP FORT MYERS FL 33907 CITY-ST-ZIP VP Change ☐ Addition TITLE ☐ Delete NAME CORBETT, HEATHER M NAME STREET ADDRESS 11929-103 CORINNE LEE COURT STREET ADDRESS FORT MYERS FL 33907 CITY - ST-7IP CITY-ST-7IP ☐ Change HILE □ Defete TITLE Addition | NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP THILE Change Addition ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete HILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-7IP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-7IP CITY-ST-7(P 12. I hereby certify that the information supplied with this filing doe's 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 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 address with all other like empowered.

NG OFFICER OR DIRECTOR

Date

Davirna Phone A

**FILED** 

ATTACHMENT JOUG0918 #PO400060633

Dear Sils or Ns. This is our flist year being a Corporation this is the reason this report is Late we had no Adea that we needed to do this and We Were not sent any paperwork at all from the state of Fig. M/4 Brother pas a Corporation and he told me of this report so we Called and had this sent to Us to fill out I ff we lould get the Late fee Wayed we will Be on time