


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2006 08:00 AM
Secretary of State

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| DOCUMENT # P07000113556 |  |
| 1. Entity Name K. E. CALDWELL, INC. | |

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|---|---|
| Principal Place of Business 663 RED WING DR. LAKE MARY, FL 32746 US | Mailing Address 663 RED WING DR. LAKE MARY, FL 32746 US |
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DO NOT WRITE IN THIS SPACE



01102006 No Chg-P CR2E034 (11/05)

| | |
|-----------------------------|--|
| 4. FEI Number 54-2157605 | Applied For <input type="checkbox"/> Not Applicable |
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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent CALDWELL, KENNETH E 663 RED WING DR. LAKE MARY, FL 32746 |
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> | (NOTE: Registered Agent signature required when reinstating) | U000000386450 01/18/06 200601 024 158.00 |
|---|--|---|

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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|---|---------------------------------------|
| 9. Election Campaign Financing Trust Fund Contribution, <input type="checkbox"/> | \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P,S CALDWELL, KENNETH E 663 RED WING DR. LAKE MARY, FL 32746 |
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12. I hereby certify that the information supplied with this filing 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 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.

| | | |
|---|----------------------------|-----------------|
| SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | Date 1-10-06 4673217124 | Daytime Phone # |
|---|----------------------------|-----------------|