


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90087 014 ***150.00

DOCUMENT # P05000130584 1. Entity Name KEITH PREDMORE CONSULTING, INC.					
Principal Place of Business 8175 WILSHIRE LAKE BLVD NAPLES, FL 34109			Mailing Address 8175 WILSHIRE LAKE BLVD NAPLES, FL 34109		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
		01112006 Chg-P		CR2E034 (11/05)	
4. FEI Number 65-0611926				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HUSSEY, ALISON C 461 SOUTH MAIN STREET LABELLE, FL 33935			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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. (NOTE: Registered Agent signature required when re-stating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PREDMORE, KEITH E 8175 WILSHIRE LAKE BLVD NAPLES, FL 34109 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <i>Keith E Predmore</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			20 JAN 2006 239 187500 <small>Date Daytime Phone #</small>		

PAVESE LAW FIRM

ATTACHMENT

40015487

Alison C. Hussey
Attorney & Counselor at Law

Florida Bar Number: 0116165
Georgia Bar Number: 380195
email: alisonhussey@paveselaw.com

P.O. Drawer 2280, 461 South Main Street, LaBelle, FL 33975 | (863) 675-5800 | (863) 983-6676 | Fax (863) 675-4998

February 6, 2006

SECRETARY OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6198
TALLAHASSEE FL 32314

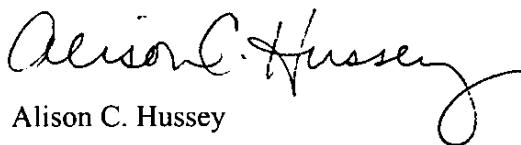
RE: Keith Predmore Consulting, Inc.
Our file No.: 72042.001

Gentlemen:

Enclosed please find the Corporation Annual Report for the above corporation along with the appropriate filing fee. Please make any changes indicated in your records.

Should you have any questions in regards hereto, please do not hesitate to contact my office.

Cordially yours,


Alison C. Hussey

ACH/ldw
Encl.