

# ANNUAL REPORT (AR)

DOCUMENT # P05000141557

1. Entity Name

KENNY BAKER WELL DRILLING, INC



**FILED**  
**Feb 02, 2007 08:00 AM**  
**Secretary of State**

Principal Place of Business  
1206 DUNNDALE STREET  
LEHIGH ACRES FL 33936

Mailing Address  
1206 DUNNDALE STREET  
LEHIGH ACRES FL 33936



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 20-3650014

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BAKER, KENNETH  
1206 DUNNDALE STREET  
LEHIGH ACRES FL 33936

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P, S ☐ Delete  
NAME BAKER, KENNETH  
STREET ADDRESS 1206 DUNNDALE STREET  
CITY- ST- ZIP LEHIGH ACRES FL 33936

TITLE VP, T ☐ Delete  
NAME BAKER, DEBRA  
STREET ADDRESS 1206 DUNNDALE STREET  
CITY- ST- ZIP LEHIGH ACRES FL 33936

TITLE D ☐ Delete  
NAME HOWARD, ROBERT  
STREET ADDRESS 1861 SUNSET TRAIL  
CITY- ST- ZIP ALVA FL 33920

TITLE D ☐ Delete  
NAME SMITH, PERRY A  
STREET ADDRESS 411 MCCUISIN RD.  
CITY- ST- ZIP SPRING CITY TN 37581

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
000000618240  
02/08/07-80022-002 150.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Debra Ann Baker

1/31/07

234-369-3568