

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000058914

1. Entity Name
K.L.D. CONSTRUCTION, INC.



Principal Place of Business
3215 AVIATION BLVD
VERO BEACH, FL 32960

Mailing Address
140 44TH TERR SW
VERO BEACH, FL 32968

FILED
Jul 25, 2008 08:00 AM
Secretary of State



07042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	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

DEPP, WILLIAM S
140 44TH TERR SW
VERO BEACH, FL 32968

**DO NOT WRITE
IN THIS SPACE**

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

William S. Depp

(NOTE: Registered Agent signature required when reappointing)

7-20-08

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME DEPP, WILLIAM S
STREET ADDRESS 2501 27TH AVENUE, SUITE F-1B
CITY-ST-ZIP VERO BEACH, FL 32960

TITLE STD
NAME DEPP, NANCY H
STREET ADDRESS 2501 27TH AVENUE, SUITE F-1B
CITY-ST-ZIP VERO BEACH, FL 32960

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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1100000956370
07/25/08-80005-011 150.00

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nancy H. Depp

7-20-08

Date

Daytime Phone #