

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000095304

Entity Name: KLATT, INC.

**FILED**  
**Feb 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9290 NICKELS BLVD.  
BOYNTON BEACH, FL 33425

**New Principal Place of Business:**

**Current Mailing Address:**

9290 NICKELS BLVD.  
BOYNTON BEACH, FL 33425

**New Mailing Address:**

FEI Number: 59-2469695

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WINCHESTER, BILL R  
9290 NICKELS BLVD.  
BOYNTON BEACH, FL 33436 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DVP  
Name: WINCHESTER, ELSIE A  
Address: 9290 NICKELS BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: TD  
Name: KLATT, ERNEST A  
Address: 130 EAST MAIN STREET  
City-St-Zip: FRANKLIN, NC 28734

Title: DPS  
Name: WINCHESTER, BILL R  
Address: 9290 NICKELS BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33436

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: BILL R. WINCHESTER

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02/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date