

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 15, 2006 8:00 am**  
**Secretary of State**

02-15-2006 90036 009 \*\*\*150.00

**DOCUMENT # P96000031122**

1. Entity Name

CKH CONSULTING, INC.



Principal Place of Business

204 E MCKENZIE  
STE. C&D  
PUNTA GORDA FL 33950

Mailing Address

1133 BAL HARBOR BLVD.  
# 1139; PMB 314  
PUNTA GORDA FL 33950

2. Principal Place of Business

12175 SW AUSTIN Ave.

3. Mailing Address

12175 SW AUSTIN Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAKE SUZY, FL

City & State

LAKE SUZY, FL 34269

Zip 34269

Country US

Zip 34269

Country US

4. FEI Number

59-3377165

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

JUNG, HUBERT F  
12175 SW AUSTIN AVE  
LAKE SUZY FL 34269

7. Name and Address of New Registered Agent

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

*Hubert Jung* HUBERT JUNG, PRESIDENT

2/4/06

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 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 PD ☐ Delete  
NAME JUNG, HUBERT F  
STREET ADDRESS 12175 SW AUSTIN AVE  
CITY-ST-ZIP LAKE SUZY FL 34269

TITLE SVP ☐ Delete  
NAME JUNG, ANDREA E  
STREET ADDRESS 12175 SW AUSTIN AVE  
CITY-ST-ZIP LAKE SUZY FL 34269

TITLE VP ☐ Delete  
NAME TOEPFER, CHRISTIAN  
STREET ADDRESS 2269 ACHILLES STREE  
CITY-ST-ZIP PORT CHARLOTTE FL 33980

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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

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

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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

*Hubert Jung* HUBERT JUNG, PRES.

2/4/06

Date

9413805892

Daytime Phone #