## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P97000020270

1. Entity Name

K.L. HOOS CORPORATION



FILED Jan 16, 2008 08:00 AN Secretary of State

Principal Place of Business

113 QUEEN CHRISTINA COURT FT PIERCE, FL 34949 Mailing Address

3055 CARDINAL DRIVE Suite 202

VERO BEACH, FL 32963



01092008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0734302 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

| CURTIS, NED P<br>3055 CARDINAL DRIVE<br>STE 202<br>VERO BEACH, FL 32963   |  |  | DO NOT WRITE<br>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   |  |  |                               |                                |  |
| FIL<br>After Ma   | E NOW!!! FEE IS \$150.00<br>ay 1, 2008 Fee will be \$550.00  | Election Campaign Finan     Trust Fund Contribution. | cing                          | \$5.00 May Be<br>Added to Fees |  |
| 10. OFFICERS AND DIRECTORS  |  |  |                               |                                |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | PD<br>HOOS-SPAETH, ANNETTE Y<br>113 QUEEN CHRISTINA COURT<br>FT. PIERCE, FL 34949  |  |                               |                                |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |  |                               | . •                            | U00000785862<br>01/17/08~80016-023 150.00                  |
| TITLE<br>NAME<br>STREET ADDREGS<br>CITY-ST-ZIP  |  |  |                               | DO                             | NOT WRITE  |
| TITLE<br>Name<br>Street address<br>City-St-Zip  |  |  |                               | IN <sup>-</sup>                | THIS SPACE   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | Sign of the Sign   |  |                               |                                |  |
| STREET ADDRESS  | A CONTRACTOR OF THE CONTRACTOR |  | <b></b>                       |                                | 1' Florida Statutas I fürthär carilly that the information |

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 supplimental 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 rectifyer 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

1-14-08

Date

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