

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000031929

Entity Name: KLEAN B, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

11934 ROSETTA ROAD
JACKSONVILLE, FL 32221

New Principal Place of Business:

1347 CASSAT AVE
JACKSONVILLE, FL 32205

Current Mailing Address:

11934 ROSETTA ROAD
JACKSONVILLE, FL 32221

New Mailing Address:

1347 CASSAT AVE.
JACKSONVILLE, FL 32205

FEI Number: 59-3439928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRASHEAR, LOREN G
11934 ROSETTA ROAD
JACKSONVILLE, FL 32221 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRASHEAR, DEANNA L
Address: 11934 ROSETTA RD.
City-St-Zip: JACKSONVILLE, FL 32221

Title: ST () Delete
Name: BRASHEAR, LOREN G
Address: 11934 ROSETTA RD.
City-St-Zip: JACKSONVILLE, FL 32221

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: BRASHEAR, DEANNA L
Address: 11934 ROSETTA RD.
City-St-Zip: JACKSONVILLE, FL 32221

Title: P (X) Change () Addition
Name: BRASHEAR, LOREN G
Address: 11934 ROSETTA RD.
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP () Change (X) Addition
Name: OLIVER, THORNTON C
Address: 4154 MARQUETTE AVE.
City-St-Zip: JACKSONVILLE, FL 32210

Title: S () Change (X) Addition
Name: OLIVER, DEBRA D
Address: 4154 MARQUETTE AVE.
City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: THORNTON OLIVER

VP

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date