


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000104031 1. Entity Name KSB ENTERPRISES, INC.	
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Principal Place of Business 1026 PINEAPPLE AVENUE N.E. PALM BAY, FL 32905	Mailing Address 1026 PINEAPPLE AVENUE N.E. PALM BAY, FL 32905
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02012006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3484165	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

BOULEY, KEVIN R
1026 PINEAPPLE AVENUE N.E.
PALM BAY, FL 32905

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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 _____ (NOTE: Registered Agent signature required when reinstalling)
Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO BOULEY, KEVIN R 1026 PINEAPPLE AVENUE N.E. PALM BAY, FL 32905
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOULEY, SHARALYN B 1026 PINEAPPLE AVENUE N.E. PALM BAY, FL 32905
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02/18/06-80072-015 150.00

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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: Kevin R. Bouley Pres. Kevin R. Bouley, President 2/5/06 321-723-6484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #