2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# P99000010455

Entity Name: KLANDERS CONSTRUCTION, INC.

Current Principal Place of Business:

691 SW SISTERS WELCOME ROAD
SUITE 102
LAKE CITY, FL 32055

New Principal Place of Business:

405 SW STONERIDGE DRIVE
LAKE CITY, FL 32024

Current Mailing Address:

P O BOX 3515
LAKE CITY, FL 32056

New Mailing Address:

FEI Number: 59-3564410 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLANDERUD, STEVEN L
405 SW STONERIDGE DRIVE
LAKE CITY, FL 32024 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: D ( ) Delete
Name: KLANDERUD, STEVEN L
Address: P O BOX 3515 N/A
City-St-Zip: LAKE CITY, FL 32056

Title: VP ( ) Delete
Name: KLANDERUD, JOSEPH J
Address: 4674 SW CR 240
City-St-Zip: LAKE CITY, FL 32024

Title: SD (X) Delete
Name: KLANDERUD, ELAINE
Address: P.O. BOX 3515
City-St-Zip: LAKE CITY, FL 32056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: KLANDERUD, STEVEN L
Address: 405 SW STONERIDGE DRIVE
City-St-Zip: LAKE CITY, FL 32024

Title: SD (X) Change ( ) Addition
Name: KLANDERUD, ELAINE M
Address: 405 SW STONERIDGE DRIVE
City-St-Zip: LAKE CITY, FL 32024

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN L. KLANDERUD D 01/28/2008
Electronic Signature of Signing Officer or Director Date