


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000058543
 1. Entity Name
 S.K. CARPENTRY, INC.



Principal Place of Business, Mailing Address
 3011 LEISURE PLACE 3011 LEISURE PLACE
 SARASOTA, FL 34234 SARASOTA, FL 34234

DO NOT WRITE IN THIS SPACE



01102005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1135576 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 KNEPP, DARLENE
 3011 LEISURE PLACE
 SARASOTA, FL 34234

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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 reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00
 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KNEPP, STEPHEN R
STREET ADDRESS	3011 LEISURE PLACE
CITY - ST - ZIP	SARASOTA, FL 34234
TITLE	D
NAME	KNEPP, ERIK
STREET ADDRESS	4300 GULF DR
CITY - ST - ZIP	HOLMES BEACH, FL 34217
TITLE	T
NAME	KNEPP, CAMERON R
STREET ADDRESS	3011 LEISURE PL
CITY - ST - ZIP	SARASOTA, FL 34234
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Stephen R. Knapp* *Stephen R. Knapp* 3-28-05 941-952-0828
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #