

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000081922

1. Entity Name
KLUGGER, INC.



FILED
Feb 01, 2008 08:00 AM
Secretary of State

Principal Place of Business
3261 SE 31ST STREET
OCALA, FL 34471

Mailing Address
3261 SE 31ST STREET
OCALA, FL 34471



01082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0951876

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KLUGGER, JOSHUA J
3261 SE 31ST STREET
OCALA, FL 34471

**DO NOT WRITE
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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PVST
NAME	KLUGGER, JOSHUA J
STREET ADDRESS	3261 SE 31ST STREET
CITY-ST-ZIP	OCALA, FL 34471
TITLE	T
NAME	KLUGGER, JOSHUA J
STREET ADDRESS	3261 SE 31ST STREET
CITY-ST-ZIP	OCALA, FL 34471
TITLE	D
NAME	KLUGGER, JOSHUA J
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #