

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 8:00 am
Secretary of State

02-16-2007 90032 025 ***150.00

DOCUMENT # P99000095030 1. Entity Name KEITH WERLE CONSTRUCTION, INC.																													
Principal Place of Business 2876 KABIBONOKKA AVE NE PALM BAY, FL 32905			Mailing Address 2876 KABIBONOKKA AVE NE PALM BAY, FL 32905																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State			City & State																										
Zip		Country		Zip																									
Country		Country		4. FEI Number 59-3607069																									
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable																									
6. Name and Address of Current Registered Agent WERLE, KEITH A 793 N. HARBOR CITY BLVD MELBOURNE, FL 32935				7. Name and Address of New Registered Agent Name WERLE KEITH A Street Address (P.O. Box Number is Not Acceptable) HWY. AIA # 503 City SATELLITE BEACH FL Zip Code 32937																									
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  KEITH A WERLE DATE 2-8-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">D WERLE, KEITH A</td> <td style="width:30%; text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>793 N. HARBOR CITY BLVD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>MELBOURNE, FL 32935</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	D WERLE, KEITH A	<input checked="" type="checkbox"/> Delete	NAME	793 N. HARBOR CITY BLVD		STREET ADDRESS	MELBOURNE, FL 32935		CITY-ST-ZIP			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">D WERLE KEITH A</td> <td style="width:30%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>HWY. AIA #503</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>SATELLITE BEACH 32937</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	D WERLE KEITH A	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	HWY. AIA #503		STREET ADDRESS	SATELLITE BEACH 32937		CITY-ST-ZIP		
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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:  KEITH A WERLE <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			2-8-07 321 723 9498 <small>Date Daytime Phone #</small>																										