

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V41347

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: K.P.R. LANDSCAPING AND MAINTENANCE, INC.

## Current Principal Place of Business:

7182 SIESTA STREET  
NAVARRE, FL 32566

## New Principal Place of Business:

## Current Mailing Address:

7182 SIESTA STREET  
NAVARRE, FL 32566

## New Mailing Address:

FEI Number: 59-3124923      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RYCROFT, KENDALL  
7182 SIESTA ST.  
NAVARRE, FL 32566      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: PD ( ) Delete  
Name: RYCROFT, KENDALL,  
Address: 7182 SIESTA ST.  
City-St-Zip: NAVARRE, FL 32566

Title: VP ( ) Delete  
Name: BROXSON, JERRY  
Address: 7251 E. BAY BLVD.  
City-St-Zip: NAVARRE, FL 32566

Title: S ( ) Delete  
Name: ADLER, TIM  
Address: 6786 LEISURE ST.  
City-St-Zip: NAVARRE, FL 32566

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: ZUPKO, BERNIE  
Address: 8146 ESPLANADE ST  
City-St-Zip: NAVARRE, FL 32566

Title: S (X) Change ( ) Addition  
Name: ZUPKO, JOEL  
Address: 3351 GREEN BRIAR CIRCLE  
City-St-Zip: GULF BREEZE, FL 32563

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KENDALL RYCROFT

PD

04/29/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date