


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 08:00 AM
Secretary of State

DOCUMENT # V65015	
1. Entity Name CONKLING CONSTRUCTION, INC.	

Principal Place of Business 4500 BELVEDERE ROAD STE G WEST PALM BEACH, FL 33415 US	Mailing Address PO BOX 7010 W.P.B., 33405 US
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04012004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0358389	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent D'ANGIO, ROBERT A JR 685 ROYAL PALM BEACH BLVD. SUITE 205 W.P. BCH, FL 33411
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**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 _____ (NOTE: Registered Agent signature required when reappointing) **DATE** _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CONKLING, III D 1338 FAIRFAX CIRCLE EAST BOYNTON BEACH, FL 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CONKLING, KATHERINE P 12871 BRIARLAKE DRIVE 4-201 PALM BEACH GARDENS, FL 334186928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BURGESS, ALEXANDRIA C 704 OSPREY WAY NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/05/04-80058-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 and all other like empowered.

SIGNATURE: Donald H Conklin III **Donald H Conklin III President** **1 April 04 (561) 687-3151**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #