


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2005 8:00 am**  
**Secretary of State**

04-20-2005 90366 017 \*\*\*150.00

|   |  |   |   |   |  |
|---|--|---|---|---|--|
| <b>DOCUMENT # V65015</b><br>1. Entity Name<br><b>CONKLING CONSTRUCTION, INC.</b>  |  |   |   |    |  |
| Principal Place of Business<br><b>4500 BELVEDERE ROAD<br/>STE G<br/>WEST PALM BEACH, FL 33415 US</b>  |  |   | Mailing Address<br><b>PO BOX 7010<br/>W.P. B., 33405 US</b>   |   |  |
| 2. Principal Place of Business<br><b>1338 FAIRFAX CIRCLE EAST</b>   |  | 3. Mailing Address<br>Suite, Apt. #, etc. |   |   |  |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.                       |   |   |  |
| City & State<br><b>BOYNTON BEACH FLORIDA</b>  |  | City & State                              |   | 4. FEI Number<br><b>65-0358389</b>  |  |
| Zip<br><b>33436</b>   |  | Country<br><b>USA</b>                     |   | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   |  |
| 6. Name and Address of Current Registered Agent<br><br><b>D'ANGIO, ROBERT A JR<br/>685 ROYAL PALM BEACH BLVD. SUITE 205<br/>W.P. BCH, FL 33411</b>  |  |   |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code                                  |  |
| 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 _____   |  |   |   |   |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2005 Fee will be \$550.00</b>   |  |   | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |   |  |
| 10. OFFICERS AND DIRECTORS  |  |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>DP<br/>CONKLING, III D<br/>1338 FAIRFAX CIRCLE EAST<br/>BOYNTON BEACH, FL 33436</b> <input type="checkbox"/> Delete                   |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>VP<br/>CONKLING, KATHERINE P<br/>12871 BRIARLAKE DRIVE 4-201<br/>PALM BEACH GARDENS, FL 334186928</b> <input type="checkbox"/> Delete |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>VP<br/>BURGESS, ALEXANDRIA C<br/>704 OSPREY WAY<br/>NORTH PALM BEACH, FL 33408</b> <input type="checkbox"/> Delete                    |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>VP<br/>YAKUBOWSKI, ALEXANDRIA C<br/>704 OSPREY WAY<br/>NORTH PALM BEACH, FL 33408</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
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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)(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, with all other like empowered. |  |   |   |   |  |
| <b>SIGNATURE: DONALD H. CONKLING III PRESIDENT/DIRECTOR</b>   |  |   |   |   |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |  |   | Date <b>16 APRIL 05</b> Daytime Phone # <b>(561) 371-5538</b>   |   |  |

**50041531**



04082005 Chg-P CR2E034 (10/03)