


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90108 046 ***150.00

DOCUMENT # F97000004081
 1. Entity Name
COMMONWEALTH BRANDS, INC.



Principal Place of Business
PO BOX 51587
BOWLING GREEN, KY 42103

Mailing Address
P.O.BX 51587
BOWLING GREEN, KY 42103

60021629

DO NOT WRITE IN THIS SPACE



02212006 No Chg-P CR2E034 (11/05)

4. FEI Number 61-1208598	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO POLING, JOHN C II 900 CHURCH STREET BOWLING GREEN, KY 42101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPS EBERT, GARY 900 CHURCH STREET BOWLING GREEN, KY 42101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPM LIVESAY, TIM 900 CHURCH STREET BOWLING GREEN, KY 42101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPIT FRANCIS, PAM 900 CHURCH STREET BOWLING GREEN, KY 42101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, CECIL 900 CHURCH STREET BOWLING GREEN, KY 42101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSA PIERCE, JOE 900 CHURCH STREET BOWLING GREEN, KY 42101

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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: John C Poling, II **John C Poling, II** 2/27/06 **270-781-9100**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #