## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000003823

Entity Name: LINTON TRUSS CORPORATION

FILED Jan 18, 2006 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
1455 SW 4TH AVENUE DELRAY BEACH, FL 33444					
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
	TH AVENUE EACH, FL 3344	44			
FEI Number: 6	65-0546481	FEI Number Applied For ( )	FEI Number Not Applicable()	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
7696 CEDA	SELDAN A RWOOD CIR. ON, FL 33434	4249 US			
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:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPCS () E LAZAROW, SELE 7696 CEDARWO BOCA RATON, F	OD CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () D NICKLIN, ROBER 1455 SW 4TH AV DELRAY BEACH	Æ.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E FEINTUCK, NORI 4751 BOCAIRE E BOCA RATON, F	BOULEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C CLAPP, ANDY C/O 150 FEDERA BOSTON, MA 02		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E COMEY, ROBER C/O 101 SECONI CEDAR RAPIDS,	D STREET SE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ()ERITTER, JOHN C/O 100 PEARL HARTFORD, CT		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: RICHARD P. SAWICK VP 01/18/2006