


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2006 08:00 AM
Secretary of State

DOCUMENT # 120800 1. Entity Name WALNUT HILL FARMS, INC.	
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Principal Place of Business 35 N. WYNDEN DR. HOUSTON, TX 77056	Mailing Address 35 N. WYNDEN DR. HOUSTON, TX 77056
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03292006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-6040180	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324
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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 re-registering) 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	D OWEN, JANE B. 35 N. WYNDEN DR. HOUSTON, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUDSON, JR., E.J. 35 N. WYNDEN DR. HOUSTON, TX 77056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HUGHES, CYNTHIA 35 N. WYNDEN DR. HOUSTON, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FURSTENBERG, CECIL 35 N. WYNDEN DR. HOUSTON, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VON BOTHMER, JOYCE 35 N. WYNDEN DR. HOUSTON, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000517238
05/01/06-80034-025 150.00

**DO NOT WRITE
IN THIS SPACE**

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 807, 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: Cynthia Hughes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/06 1136218700
Date Daytime Phone