

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # 190622	
1. Entity Name WARD MOTOR COMPANY	

Principal Place of Business C/O ALLEN E. WARD 300 THOMAS DR. COTTONDALE FL 32431	Mailing Address PO BOX 97 COTTONDALE FL 32431
--	---



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE	CR2E034 (10/05)
4. FEI Number 63-0335509	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WARD, ALLEN E 3492 HWY 231 N. COTTONDALE FL 32431

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE _____
--	--	------------

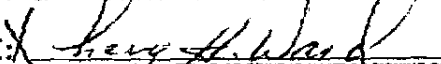
FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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	☐ Delete PD WARD, LEVY H 204 W. WOODLAND GENEVA AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete VD WARD, ALLEN E 3492 HWY 231 N. COTTONDALE FL 32431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete D WARD, JOHN T 104 N. WOODLAND GENEVA AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition U000000469076 03/25/06-80013-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: 	Levy H. Ward	3-14-06	334-684-3641
--	---------------------	----------------	---------------------