

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 06, 2006 08:00 AM
Secretary of State

DOCUMENT # 466854

1. Entity Name
CONTROLS & WEIGHING SYSTEMS, INC.



Principal Place of Business
**205 FAULKENBURG ROAD
BRANDON, FL 33619**

Mailing Address
**205 FAULKENBURG ROAD
BRANDON, FL 33619**

DO NOT WRITE IN THIS SPACE



01042006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1588191

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WOOTEN, STEPHEN M
2101 W. SANDALWOOD DR.
PLANT CITY, FL 33568**

**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 _____

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**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DS
NAME	WOOTEN, RAYMOND
STREET ADDRESS	1155 GEORGE ST
CITY - ST - ZIP	BARTOW, FL
TITLE	PD
NAME	WOOTEN, STEPHEN M
STREET ADDRESS	1411 SANDALWOOD DRIVE
CITY - ST - ZIP	PLANT CITY, FL 33563
TITLE	D
NAME	WINGLEWICH, MICHAEL J
STREET ADDRESS	1702 S FLORIDA AVE
CITY - ST - ZIP	SEFFNER, FL 33584
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11000001378139
01/09/06-80015-013 150.00

**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 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen M. Wooten

Date

1/4/06

Daytime Phone #

(813) 681-5579