## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 688436** 

Entity Name: WOCO SALES, INC.

FILED Jan 05, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3551 ARLINGTON OAKS DRIVE MOBILE, AL 36695 **Current Mailing Address: New Mailing Address:** 3551 ARLINGTON OAKS DRIVE MOBILE, AL 36695 FEI Number: 59-2032051 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: WEBBER, KENNETH R 13901 SMOKERISE COURT ORLANDO, FL 32832 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/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition WEBBER, VIVIAN A Name: Name: WEBBER, VIVIAN A 3551 ARLINGTON OAKS DR 3551 ARLINGTON OAKS DR Address: Address: City-St-Zip: MOBILE AL City-St-Zip: MOBILE, AL 36695 Title: PD Title: () Delete () Change () Addition Name: WEBBER, KENNETH R Name: 13901 SMOKERISE CT Address: Address: ORLANDO, FL 32832 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: VD () Change () Addition WEBBER, RONALD K Name: Name: 2446 STERLING MANOR DRIVE Address: Address: City-St-Zip: BUFORD, GA 30518 City-St-Zip: Title: VD () Delete Title: () Change () Addition WEBBER, STEVEN S Name: Name: Address: 2912 COTTAGE KNOLL DR Address: City-St-Zip: MOBILE, AL 36695 City-St-Zip:

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: VIVIAN A WEBBER SD 01/05/2006