## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 829644**

Entity Name: WOODRUFF & SONS, INC.

FILED Mar 14, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
6450 31 ST EAST BRADENTON, FL 342820127 US				6450 31 ST EAST BRADENTON, FL 34203 US		
Current Mailing Address:				New Mailing Address:		
P.O. BOX BRADENT	10127 ON, FL 34282	0127 US				
FEI Number: 35-1058916 FEI Number Applied For ( )			FEI Number Not Ap	El Number Not Applicable ( ) Certificate of Status Desired ( )		
Name and	Address of C	urrent Registered Agent:	Name ar	nd Address o	f New Registered Agent:	
6450 31ST P.O. BOX	FF, ROY J PD ST., E. 10127 ON, FL 34282					
	named entity s of Florida.	submits this statement for the pu	rpose of changing	g its registered	d office or registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ager	nt		Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	WOODRUFF, R 1007 GULF DR		Title: Name: Address: City-St-Zip	c c	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () WOODRUFF, B 6450 31ST STR BRADENTON, F	EET E	Title: Name: Address: City-St-Zip	c c	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () WOODRUFF, D 9220 COUNTRY BRADENTON, F	/ VIEW LANE	Title: Name: Address: City-St-Zip	:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () WAKEMAN, LIN 2211 PALMA SO BRADENTON, F	OLA BLVD.	Title: Name: Address: City-St-Zip	:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () BELL, TODD R 301 NIESEN RI LA PORTE, IN		Title: Name: Address: City-St-Zip	:	( ) Change ( ) Addition	
Title: Name: Address:	HEEG, NORA N 147 FAULKNOF		Title: Name: Address:	AS HEEG, NOR. 206 AUTUMI		

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: LINDA S. WAKEMAN STD 03/14/2006