


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2006 08:00 AM
Secretary of State

DOCUMENT # F04000004841


1. Entity Name
WERRES CORPORATION



Principal Place of Business Mailing Address

**807 EAST SOUTH STREET
 FREDERICK, MD 21701** **807 EAST SOUTH STREET
 FREDERICK, MD 21701**

DO NOT WRITE IN THIS SPACE



05222006 No Chg-P CR2E034 (11/05)

4. FEI Number 53-0241112	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00
 Due by September 6, 2006**

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	CP SENECAL, DANIEL F 807 EAST SOUTH STREET FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VV SOUZA, PAUL A 807 EAST SOUTH STREET FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KUHN, JANET L 807 EAST SOUTH STREET FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000566754
 06/05/06-80006-002 550.00

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: *Janet L Kuhn* 5/31/06 301-620-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #