

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006235

Entity Name: DWIGHT FINANCIAL, INC.

FILED  
Jan 11, 2006  
Secretary of State

## Current Principal Place of Business:

3320 W. CHERYL DR. B-118  
PHOENIX, AZ 85051

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 7397  
PHOENIX, AZ 850117397

## New Mailing Address:

FEI Number: 86-0609400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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:

Title: CPTD ( ) Delete  
Name: HEATH, CRAIG  
Address: P.O. BOX 7397  
City-St-Zip: PHOENIX, AZ 850117397

Title: S ( ) Delete  
Name: WILLIAMS, ROBIN  
Address: P.O. BOX 7397  
City-St-Zip: PHOENIX, AZ 850117397

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: CRAIG HEATH

CPTD

01/11/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date