## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000000974

Entity Name: C&A INDUSTRIES, INC.

FILED Jan 05, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 11825 Q STREET OMAHA, NE 681373503 **Current Mailing Address: New Mailing Address:** 11825 Q STREET P.O. BOX 3037 OMAHA, NE 681373503 OMAHA, NE 681030037 FEI Number: 47-0592910 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: () Change () Addition HANSEN, THOMAS L Name: Name: 11825 Q STREET Address: Address: City-St-Zip: OMAHA, NE 681373503 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition COURNAGE, LARRY J Name: Name: COURTNAGE, LARRY J 11825 Q STREET 11825 Q STREET Address: Address: OMAHA, NE 681373503 OMAHA, NE 681373503 City-St-Zip: City-St-Zip: Title: (X) Change ( ) Addition ( ) Delete Title: COURNAGE, KATHY A COURTNAGE, KATHY A Name: Name: 11825 O STREET 11825 O STREET Address: Address: City-St-Zip: OMAHA, NE 681373503 City-St-Zip: OMAHA, NE 681373503 Title: () Delete Title: () Change () Addition THOMPSON, SCOT A Name: Name: Address: 11825 Q STREET Address: City-St-Zip: OMAHA, NE 681373503 City-St-Zip: Title: Title: ( ) Delete () Change () Addition HERBOLSHEIMER, ROBERT L Name: Name: 11825 Q STREET Address: Address: City-St-Zip: OMAHA, NE 681373503 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: ROBERT L. HERBOLSHEIMER Τ 01/05/2006