2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2006
Secretary of State

DOCUMENT# F05000004028

Entity Name: DRY NO RUST DOG INC.

Current Principal Place of Business:

2711 CENTERVILLE ROAD, SUITE 400
WILMINGTON, DE 19808

New Principal Place of Business:

Current Mailing Address:

23781 U.S. HWY. 27 SUITE 328
LAKE WALES, FL 338597802

New Mailing Address:

FEI Number: 20-2914705 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FAENZI, MARY
5716 STONEHAVEN DRIVE
N. FT. MYERS, FL 239977732 US

Name and Address of New Registered Agent:

LEGG, WAYNE
3375 21ST PL SW
LARGO, FL 33774 US

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: WAYNE LEGG 03/10/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CPST ( ) Delete
Name: CRAWFORD, SHIRLEY
Address: 23781 US HWY 27 STE 328
City-St-Zip: LAKE WALES, FL 338297802

Title: VC ( ) Delete
Name: THE COMPANY CORPORAT, ION
Address: 2711 CENTERVILLE ROAD STE 400
City-St-Zip: WILLINGTON, DE 19808

Title: VP ( ) Delete
Name: LEGG, WAYNE
Address: 23781 US HWY 27 STE 328
City-St-Zip: LAKE WALES, FL 338297802

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPST (X) Change ( ) Addition
Name: CRAWFORD, SHIRLEY
Address: 23781 US HWY 27 STE 328
City-St-Zip: LAKE WALES, FL 33859

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: SHIRLEY CRAWFORD P/D 03/10/2006
Electronic Signature of Signing Officer or Director Date