2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # F27281 Apr 26, 2005 08:00 AM Secretary of State 1. Entity Name D & W LAUX, INC. Principal Place of Business Mailing Address 3906-AA TAMIAMI TRAIL 3906-AA TAMIAMI TRAIL, E NAPLES, FL 34112 US NAPLES, FL 34112 US Company of the 01052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2070482 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LANIER, SUZANNE D. DO NOT WRITE 2640 COLDEN GATE PKWAY SUITE 206 IN THIS SPACE NAPLES, FL 34105 3. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS P TITLE NAME LAUX, WILLIAM R STREET ADDRESS 3100 41ST, ST, SW CITY - ST - ZIP NAPLES, FL 34116 U00000331540 TITLE 04/26/05-80021-022 150.00 NAME LAUX, DIANA C STREET ADDRESS 3100 41 ST, SW CITY-ST-ZIP NAPLES, FL 34116 TITI F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS City-ST-ZIP TITUE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

William R LANC

Daytime Phone #

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR