

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90347 020 ***150.00

DOCUMENT # F91636 1. Entity Name AER-FLO CANVAS PRODUCTS, INC.			
Principal Place of Business 1904 44TH AVENUE EAST BRADENTON, FL 34203		Mailing Address PO BOX 1356 DRACO, FL 34264	
2. Principal Place of Business 4455 18th Street East		3. Mailing Address PO BOX 1356	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Bradenton, FL		City & State ONECO, FL	
Zip 34203		Zip 34264	
Country USA		Country 	
6. Name and Address of Current Registered Agent HENNING, WILLIAM W 1904 44TH AVENUE EAST BRADENTON, FL 34203		7. Name and Address of New Registered Agent Name HENNING, WILLIAM W. Street Address (P.O. Box Number is Not Acceptable) 4455 18th STREET EAST City BRADENTON FL Zip Code 34203	
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 <u><i>William W. Henning</i></u> DATE <u>4-14-06</u> <small>Signature typed or printed name of registered agent and title (Last, first, middle initial) (NOTE: Registered agent's signature required when re-stating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	PT HENNING, WILLIAM W 1904 44TH AVENUE EAST BRADENTON, FL 34203	TITLE NAME STREET ADDRESS CITY ST ZIP	P/T/D 4455 18th STREET EAST BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY ST ZIP	VS HENNING, BETSY A 1904 44TH AVENUE EAST BRADENTON, FL 34203	TITLE NAME STREET ADDRESS CITY ST ZIP	V/S/D 4455 18th STREET EAST
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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 a other like empowered.			
SIGNATURE: <u><i>William W. Henning</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>4-14-06</u> <small>DATE</small>	