

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000004004

Entity Name: WOERNER SOUTH, INC.

FILED
Apr 06, 2005
Secretary of State

Current Principal Place of Business:

777 S FLAGLER DR
STE 1100 EAST
W. PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

777 S FLAGLER DR
STE 1100 EAST
W. PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 65-0432671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, LARRY B
505 S FLAGLER DRIVE STE 1100
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

JONES FOSTER SERVICE, LLC
505 S FLAGLER DRIVE STE 1100
WEST PALM BEACH, FL 33401 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: LARRY B. ALEXANDER

04/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: WOERNER, LESTER J
Address: 777 S FLAGLER DR STE 1100 EAST
City-St-Zip: WEST PALM BEACH, FL 33401

Title: P () Delete
Name: MILLER, KATHY T
Address: 777 S FLAGLER DR STE 1100 EAST
City-St-Zip: WEST PALM BEACH, FL 33401

Title: ST () Delete
Name: WILLIAMS, DAVID T
Address: 777 S FLAGLER DR STE 1100 EAST
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 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: T. DAVID WILLIAMS

ST

04/06/2005

Electronic Signature of Signing Officer or Director

Date