2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003071

Entity Name: ALLEN-EDMONDS SHOE CORPORATION

FILED Jan 06, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	LS RD BOX 99 SHINGTON, WI					
Current Mailing Address:			New Mailir	New Mailing Address:		
201 E 7 HILLS RD BOX 998 PORT WASHINGTON, WI 530740998						
FEI Number: 39-0258380 FEI Number Applied For () FEI		FEI Number Not Appli	licable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:			Name and	Address of New Registered Agent:		
BECK, ABBY ALLEN-EDMONDS COMPANY STORE SILVER SANDS FACTORY STORE, 5101 HWY 98 E DESTIN, FL 32541 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:						
	Electronic	Signature of Registered Agent		Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () E FLECKENSTEIN, 16655 W BLUEN BROOKFIELD, W	OUND RD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () E DIULIO, ALBERT 1190 PALOMAR SAN MARINO, CA	RD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DIULIO, ALBERT J REV. 1616 P STREET NW WASHINGTON, DC 200361420		
Title: Name: Address: City-St-Zip:	BUCHANAN, ROE	ICE ST., 4TH FLOOR	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () E VAN DEUREN, R 1000 N WATER S MILWAUKEE, W	ICHARD ST #2100	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	J () [STOLLENWERK, 201 E SEVEN HII PORT WASHING	LLS RD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition STOLLENWERK, JOHN 201 E SEVEN HILLS RD PORT WASHINGTON, WI 53074		
Title: Name: Address: City-St-Zip:	D () E FISCHER, PETEI N 233 CLAER VU CEDAR GROVE,	E SHORES	Title: Name: Address: City-St-Zip:	() Change () Addition		

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: JOHN J STOLLENWERK D 01/06/2006