2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006
Secretary of State

DOCUMENT# F99000000183

Entity Name: WOERNER DEVELOPMENT, INC.

Current Principal Place of Business:

818 N MCKENZIE ST
FOLEY, AL 36535

New Principal Place of Business:

Current Mailing Address:

818 N MCKENZIE ST
FOLEY, AL 36535

New Mailing Address:

POST OFFICE BOX 820
FOLEY, AL 36536

FEI Number: 58-2362394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCAPECCHI, STEPHEN
33 PEEL WAY
PENSACOLA, FL 32533 US

Name and Address of New Registered Agent:

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:

Title: CEOP ( ) Delete
Name: WOERNER, GEORGE
Address: 818 N MCKENZIE ST
City-St-Zip: FOLEY, AL 36535

Title: ST ( ) Delete
Name: WOERNER, ROGER
Address: 818 N MCKENZIE ST
City-St-Zip: FOLEY, AL 36535

Title: CFO ( ) Delete
Name: MOORE, NORMAN
Address: 818 N MCKENZIE ST
City-St-Zip: FOLEY, AL 36535

Title: COO ( ) Delete
Name: SCAPECCHI, STEVE
Address: 818 N MCKENZIE ST
City-St-Zip: FOLEY, AL 36535

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:

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: NORMAN MOORE CFO 01/30/2006

Electronic Signature of Signing Officer or Director Date