

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G05799

FILED
Apr 19, 2006
Secretary of State

Entity Name: AMERICA'S NO. 1 LIFE AND HEALTH AGENCY, INC.

Current Principal Place of Business:

4833 COCONUT CREEK PKWY
COCONUT CREEK, FL 33063 US

New Principal Place of Business:

Current Mailing Address:

4833 COCONUT CREEK PKWY
STE 305
COCONUT CREEK, FL 33063 US

New Mailing Address:

FEI Number: 59-2273712 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WATON, SCOTT
4833 COCONUT CREEK PKWY
COCONUT CREEK, FL 33063 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: SD () Delete
Name: WATON, CRAIG,
Address: 940 SWEETWATER LANE #518
City-St-Zip: BOCA RATON, FL 33431

Title: PD () Delete
Name: WATON, SCOTT,
Address: 1483 ESTWARY TRAIL
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SCOTT WATON

SD

04/19/2006

Electronic Signature of Signing Officer or Director

Date