

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G12789

Entity Name: WALTER CARLSON, INC.

FILED
Jul 06, 2006
Secretary of State

Current Principal Place of Business:

5333 S.W. 86 WAY
COOPER CITY, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

5333 S.W. 86 WAY
COOPER CITY, FL 33328 US

New Mailing Address:

FEI Number: 59-2291727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCUS, PAUL R.
9200 S. DADELAND BLVD
SUITE #520
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

MARCUS, PAUL R.
9990 SW 77 AVE.
PH 1
MIAMI, FL 33156 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: PAUL R. MARCUS

07/06/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARLSON, WALTER J.,
Address: 5333 SW 86 WAY
City-St-Zip: COOPER CITY, FL

Title: VST () Delete
Name: CARLSON, WALTER J
Address: 5333 SW 86 WAY
City-St-Zip: COOPER CITY, FL 33328

Title: D (X) Delete
Name: CARLSON, RHONDA L. P, OST
Address: 5333 SW 86 WAY
City-St-Zip: COOPER CITY, FL

Title: D (X) Delete
Name: POST, FERN,
Address: 6347 HITCHING POST WAY
City-St-Zip: DELRAY BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CARLSON, WALTER J
Address: 5333 SW 86 WAY
City-St-Zip: COOPER CITY, FL

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: WALTER J. CARLSON

PD

07/06/2006

Electronic Signature of Signing Officer or Director

Date