2007 FOR PROFIT CORPORATION

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED ANNUAL REPORT Jan 31, 2007 08:00 AM DOCUMENT # G88316 **Secretary of State** 1. Entity Name D.W.H. CORPORATION Mailing Address Principal Place of Business 1451 W. FRENCH AVENUE P.O.BOX 740058 ORANGE CITY, FL 32763 ORANGE CITY, FL 32774-0058 01132007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2383510 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HENDERSON, DANIEL W. DO NOT WRITE 1451 WEST FRENCH AVENUE ORANGE CITY, FL 32763 IN THIS SPACE 5. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstaling) DATE Un0000612466 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 02/02/07-80108-001 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE HENDERSON, DANIEL W. NAME STREET ADDRESS 1451 WEST FRENCH AVENUE CITY-ST-ZIP ORANGE CITY, FL 32763 TITLE HENDERSON, NATALIE NAME STREET ADDRESS 1451 WEST FRENCH AVENUE ORANGE CITY, FL 32763 CITY-ST-ZIP NAME STREET AODRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE TITLE MAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR