2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007
Secretary of State

DOCUMENT# H23332

Entity Name: WOOLEMS, INC.

Current Principal Place of Business:

% JAMES WOOLEMS
2900 HILLSBORO ROAD
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

% JAMES WOOLEMS
2900 HILLSBORO ROAD
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 59-2450560 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOOLEMS, JAMES
2900 HILLSBORO ROAD
WEST PALM BEACH, FL 33405 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: PD ( ) Delete
Name: WOOLEMS, JAMES,
Address: 259 MERRAIN ROAD
City-St-Zip: PALM BEACH, FL 33480

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WOOLEMS, JAMES
Address: 259 MERRAIN ROAD
City-St-Zip: PALM BEACH, FL 33480

Title: VP ( ) Change (X) Addition
Name: ROGERS, JOHN
Address: 1801 S FLAGLER DR #1204
City-St-Zip: WEST PALM BEACH, FL 33401

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: JAMES WOOLEMS PD 01/18/2007

Electronic Signature of Signing Officer or Director — Date