2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H62895

Entity Name: 435 CORPORATION

FILED Mar 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

435 FOOTMAN LANE 5435 S TROPICAL TRAIL

MERRITT ISLAND, FL 32952 US MERRITT ISLAND, FL 32952 US

Current Mailing Address: New Mailing Address:

% EUGENE K. BJERNING 5435 S TROPICAL TRAIL

435 FOOTMAN LANDING MERRITT ISLAND, FL 32952 US MERRITT ISLAND, FL 32952

FEI Number: 59-2544341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BJERNING, EUGENE K. BJERNING, EUGENE K. 5435 S TRÓPICAL TRAIL 435 FOOTMAN LANDING

MERRITT ISLAND, FL 32952 US MERRITT ISLAND, FL 32952 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: 03/08/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete BJERNING, PATRICIA, BJERNING, PATRICIA, Name: Name: 435 FOOTMAN LANDING 5435 S TROPICAL TRAIL Address: Address:

City-St-Zip: MERRITT ISLAND, FL City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: Title: (X) Change () Addition () Delete Name: BJERNING, EUGENE K., Name: BJERNING, EUGENE K., 435 FOOTMAN LANDING Address: 5435 S TROPICAL TRAIL Address: MERRITT ISLAND, FL MERRITT ISLAND, FL 32952 City-St-Zip: 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: PATRICIA L BJERNING DP 03/08/2006