## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J45854

FILED Jan 14, 2006 Secretary of State

Entity Name: GRUDEM PROPERTIES, INCORPORATED

Current Principal Place of Business:		of Business:	New Principal Place of Business:		
30 VILLAG PT 320					
ONGWOO	DD, FL 32779	US			
current Mailing Address:		:	New Mailing Address:		
	)8TH WAY ALE, AZ 85255	US			
El Number:	59-2747279	FEI Number Applied For ( )	El Number Not Appli	cable ( ) Certificate of Status Desired ( )	
ame and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:	
30 VILLAC	ARDEN E. GE PL APT 320 DD, FL 32779	US			
ha ahaya	named entity as	boots this statement for the purp	aca of changing it	a registered office or registered agent or be	
	named entity su of Florida.	bmits this statement for the purp	ose of changing it	s registered office or registered agent, or bo	
the State	of Florida. ** RE:		ose of changing it	s registered office or registered agent, or bo	
the State	of Florida. ** RE:	bmits this statement for the purp	ose of changing it	s registered office or registered agent, or bo Date	
the State	of Florida.  RE: Electronic		ose of changing it		
the State	of Florida.  RE: Electronic	Signature of Registered Agent  Frust Fund Contribution ( ).			
the State	e of Florida.  RE:  Electronic  Inpaign Financing of AND DIRECT	Signature of Registered Agent  Frust Fund Contribution ( ).  ORS: Delete N E., APT 320		Date	
the State IGNATUR lection Carr FFICERS tle: ame: ddress:	Electronic  RE:  Electronic  AND DIRECT  D () E  GRUDEM, ARDE  430 VILLAGE PL  LONGWOOD, FL	Signature of Registered Agent  Frust Fund Contribution ( ).  ORS: Delete N E., APT 320 32779 Delete C. APT 320	ADDITION Title: Name: Address:	Date S/CHANGES TO OFFICERS AND DIRECT	
the State GNATUR ection Carr FFICERS de: ame: ddress: ty-St-Zip: de: ame: ddress:	Electronic	Signature of Registered Agent  Frust Fund Contribution ( ).  ORS:  Delete N E., APT 320 32779  Delete C. APT 320 32779  Delete E VAY	ADDITION  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  S/CHANGES TO OFFICERS AND DIRECT  ( ) Change ( ) Addition	

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: WAYNE GRUDEM DPT 01/14/2006