2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006
Secretary of State

DOCUMENT# J66472

Entity Name: WOODSON & ASSOCIATES, INC.

Current Principal Place of Business:

2189 NORTH US #1
MIMS, FL 32754

New Principal Place of Business:

Current Mailing Address:

2189 NORTH US #1
TITUSVILLE, FL 32796

New Mailing Address:

FEI Number: 59-2802904 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MILLER, PERRY W., III
2189 N US 1
TITUSVILLE, FL 32796 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: P ( ) Delete
Name: MILLER, PERRY W., II, I
Address: 2189 N US 1
City-St-Zip: TITUSVILLE, FL 32796

Title: TS ( ) Delete
Name: MILLER, ADRIENNE M.
Address: 504 BOXWOOD LANE
City-St-Zip: TITUSVILLE, FL 32796

Title: V ( ) Delete
Name: OVERSTREET, BYRON W
Address: 5635 PALM ST
City-St-Zip: SCOTTSMOOR, FL 32775

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MILLER, PERRY W III
Address: 2189 N US 1
City-St-Zip: TITUSVILLE, FL 32796

Title: TS (X) Change ( ) Addition
Name: MILLER, ADRIENNE M.
Address: 504 BOXWOOD LN
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: V (X) Change ( ) Addition
Name: OVERSTREET, BYRON W
Address: 6250 DIXIE WAY
City-St-Zip: MIMS, FL 32754

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: ADRIENNE M. MILLER TS 04/20/2006

Electronic Signature of Signing Officer or Director Date