## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Mar 30, 2007 08:00 A Secretary of State DOCUMENT # J80342 FORT WALTON MACHINING, INC. Principal Place of Business Mailing Address **43 JET DRIVE 43 JET DRIVE** FT. WALTON BCH., FL 32548 FT. WALTON BCH., FL 32548 CR2E034 (11/05) 03222007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2823872 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE MCDONALD, TIMOTHY J 43 JET DRIVE FT WALTON BCH, FL 32548 IN THIS SPACE 8. 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) \$5.00 May Be 9. Etection Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE MCDONALD, TIMOTHY J STREET ADDRESS 43 JET DRIVE CITY-ST-ZIP FT WALTON BCH, FL 32548 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does rol 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.

MEDONALD

**FILED**