2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# K83334

Entity Name: GRAEBEL/SOUTH FLORIDA MOVERS, INC.

Current Principal Place of Business:

2900 SW 15TH STREET
DEERFIELD BEACH, FL 33442 US

New Principal Place of Business:

Current Mailing Address:

2900 SW 15TH STREET
DEERFIELD BEACH, FL 33442 US

New Mailing Address:

FEI Number: 65-0109880 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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: D ( ) Delete
Name: GRAEBEL, DAVID W
Address: 16346 E. AIRPORT CIRCLE
City-St-Zip: AURORA, CO 80011

Title: VPSD ( ) Delete
Name: WARE, G. LANE
Address: 500 THIRD STREET, SUITE 700
City-St-Zip: WAUSAU, WI 54403 US

Title: P/D ( ) Delete
Name: GRAEBEL, WILLIAM H
Address: 16346 E. AIRPORT CIRCLE
City-St-Zip: AURORA, CO 80011 US

Title: T ( ) Delete
Name: SILER, BRADLEY
Address: 16346 E. AIRPORT CIRCLE
City-St-Zip: AURORA, CO 80011

Title: D ( ) Delete
Name: GRAEBEL, BENJAMIN D
Address: 16346 E. AIRPORT CIRCLE
City-St-Zip: AURORA, CO 80011

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: G. LANE WARE VP 04/10/2006

Electronic Signature of Signing Officer or Director — Date