2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L26592

Entity Name: WALSH DISTRIBUTING COMPANY, INC.

FILED Sep 04, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

3467 PARKWAY CENTER COURT 9303 SIR LAWRENCE CT. ORLANDO, FL 32808 WINDERMERE, FL 34786 US

Current Mailing Address: New Mailing Address:

3467 PARKWAY CENTER COURT P. O. BOX 203

ORLANDO, FL 32808 GOTHA, FL 34734 US

FEI Number: 59-2978711 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WALSH, CELISSA J. WALSH, CELISSA J. 3467 PARKWAY CENTER COURT 9303 SIR LAWRENCE CT. ORLANDO, FL 32808 WINDERMERE, FL 34786 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: 09/04/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

() Delete Title: (X) Change () Addition

WALSH, CELISSA J., WALSH, CELISSA J., Name: Name: 9303 SIR LAWRENCE CT Address: 9303 SIR LAWRENCE CT Address: City-St-Zip: WINDERMERE, FL City-St-Zip: WINDERMERE, FL 34786

Title: Title: (X) Change () Addition () Delete

WALSH, THOMAS F., JR, Name: WALSH, THOMAS F., JR. Name: 9303 SIR LAWRENCE CT Address: 9303 SIR LAWRENCE CT Address: WINDERMERE, FL WINDERMERE, FL 34786 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CELISSA J. WALSH 09/04/2007 ST