


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # N03000008841 1. Entity Name BULLWARK, INC.	
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Principal Place of Business 4301 W CAYUGA ST TAMPA, FL 33614	Mailing Address 4301 W CAYUGA ST TAMPA, FL 33614
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DO NOT WRITE IN THIS SPACE



04272007 No Chg-NP CR2E037 (4/06)

4. FEI Number 13-4267549	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WILLYOUNG, JOHN WESLEY
4726 NORTH LOIS AVENUE
SUITE A-2
TAMPA, FL 33614**

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILLYOUNG, JOHN WESLEY 527 LAKEVIEW DRIVE OLDSMAR, FL 34677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LUBOWIECKY, MARK 1002 VISTA POINT DRIVE TAMPA, FL 33635
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SNYDER, WILLIAM 15828 DEEP CREEK LANE TAMPA, FL 33624
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOOTS, MICHAEL 4618 LANDSCAPE DRIVE TAMPA, FL 33624
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MILLER, JOHN 4701 BULLOCK COURT TAMPA, FL 33624
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U000000747439
05/17/07-80026-008 61.25

12. I hereby certify that the information supplied with this filing does not 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 617, 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.

SIGNATURE: John Willyoung **4-28-07** **813-872-0077**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #