2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006
Secretary of State

DOCUMENT# P00000008048

Entity Name: PW SQUARE, INC.

Current Principal Place of Business:

1786 TRADE CENTER WAY
SUITE #2
NAPLES, FL 34109

New Principal Place of Business:

10482 AUTUMN BREEZE DRIVE
#201
BONITA SPRINGS, FL 34135

Current Mailing Address:

1786 TRADE CENTER WAY
SUITE #2
NAPLES, FL 34109

New Mailing Address:

PO BOX 112709
NAPLES, FL 34108

FEI Number: 59-3620716 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WISE, PAT W
1786 TRADE CENTER WAY
2
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

WISE, PAT W
10482 AUTUMN BREEZE DRIVE
201
BONITA SPRINGS, FL 34135 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: PAT W. WISE 03/13/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WISE, PAT W `
Address: 1786 TRADE CENTER WAY #2
City-St-Zip: NAPLES, FL 34109

Title: VP ( ) Delete
Name: EGHTEDARI, LEIGH ASHLEY W
Address: 3370 HIDDEN BAY DRIVE #403
City-St-Zip: AVENTURA, FL 33180

Title: ST ( ) Delete
Name: GLEMOT, MARY ANN W `
Address: 3370 HIDDEN BAY DRIVE #403
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WISE, PAT W `
Address: 10482 AUTUMN BREEZE DRIVE #201
City-St-Zip: BONITA SPRINGS, FL 34135

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: PAT W. WISE P 03/13/2006
Electronic Signature of Signing Officer or Director Date