FILED 2006 FOR PROFIT CORPORATION ANNUAL REPORT Feb 09, 2006 08:00 AN DOCUMENT # P00000041249 **Secretary of State** 1. Entity Name NW&M FINANCIAL CONSULTING, INC. Principal Place of Business Mailing Address 2432 FLAGLER AVE 2432 FLAGLER AVE KEY WEST, FL 33040 KEY WEST, FL 33040 02062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 65-1002749 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WILLIS, GUY A DO NOT WRITE 2432 FLAGLER AVE KEY WEST, FL 33040 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 1/000001426878 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 20/0<u>6-80060-019</u> OFFICERS AND DIRECTORS 10. DVP TITLE NAME WILLIS, GUY A 2432 FLAGLER AVE STREET ADDRESS CITY-ST-ZIP KEY WEST, FL 33040 NILES, JACK D JR NAME 2432 FLAGLER AVENUE STREET ADDRESS CITY-ST-ZIP KEY WEST, FL 33040 TITLE NAME MOORE, SHARON A STREET ADDRESS 2432 FLAGLER AVENUE DO NOT WRITE CITY-ST-ZIP KEY WEST, FL 33040 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling 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 path; 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.

SIGNATURE:

NAME STREET ADDRESS GITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NIUS JK.,

2/7/16

Daytime Phone #