2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000064508

Entity Name: CUSTOM PRODUCTS & DEVELOPMENT INC

FILED Feb 20, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
9025 CRICHTON WOOI ORLANDO, FL 32819	D DR			
Current Mailing Address:		New Mailing Address:		
9025 CRICHTON WOOI ORLANDO, FL 32819	D DR			
FEI Number: 59-3654493	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
BRAEUNING, PHIL 9025 CRICHTON WOOI ORLANDO, FL 32835	D DR US			
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electro	nic Signature of Registered Age	ent	Date	
Election Campaign Financin	g Trust Fund Contribution ().			

OFFICERS AND DIRECTORS:

ORLANDO, FL 32819

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

ORLANDO, FL 32819

Title: () Delete Title: (X) Change () Addition BRAEUNING, PHIL C BRAEUNING, PHIL C Name: Name: 8621 WILLOW KANE CT 9025 CRICHTON WOODS Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32819 Title: () Delete Title: (X) Change () Addition BRAEUNING, KERRY M BRAEUNING, KERRY M Name: Name: Address: 8621 WILLOW KANE CT Address: 9025 CRICHTON WOODS DR ORLANDO, FL 32835 ORLANDO, FL 32819 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: BRAEUWING, KRAIG Name: BRAEUWING, KRAIG Address: 9025 CRICHSON WOODS DR Address: 9025 CRICHTON WOODS DR

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.

City-St-Zip:

SIGNATURE: PHIL BRAEUNING PRES 02/20/2006