

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000014141

FILED
Jan 11, 2006
Secretary of State

Entity Name: WALDEN FARM PASO FINOS, INC.

Current Principal Place of Business:

811-B CYPRESS VILLAGE BLVD
RUSKIN, FL 33573

New Principal Place of Business:

Current Mailing Address:

811-B CYPRESS VILLAGE BLVD
RUSKIN, FL 33573

New Mailing Address:

FEI Number: 59-3704307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, V J
811-B CYPRESS VILLAGE BLVD
RUSKIN, FL 33573 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BROOKS, LORI
Address: RT 3 BOX 846
City-St-Zip: BONIFAY, FL 32425

Title: STD () Delete
Name: OWENS, V J
Address: 811-B CYPRESS VILLAGE BLVD
City-St-Zip: RUSKIN, FL 33573

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BROOKS, LORI
Address: 1954 HIGHWAY 177A
City-St-Zip: BONIFAY, FL 32425

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: V. JEAN OWENS

STD

01/11/2006

Electronic Signature of Signing Officer or Director

Date