## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Secretary of State DOCUMENT # P02000023017 07-12-2006 90005 034 \*\*\*150.00 WALKLEY & WALKLEY, P.A. Principal Place of Business Mailing Address 102 ARMENIA AVENUE SOUTH 102 ARMENIA AVENUE SOUTH 50022167 **TAMPA, FL 33609** TAMPA, FL 33609 2. Principal Place of Business 3. Mailing Address Post Office Box 2348 633 Marmora Avenue Suite, Apt. #, etc. Suite, Apt. #, etc. 07052006 CR2E034 (11/05) Cha-P 4. EEI Number Applied For Tampa, Fl. fämbä, fl. 33601 33606 01-0656219 Not Applicable Country USA \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent W. Walkley WALKLEY, ROBERT W Robert Street Address (P.O. Box Number is Not Acceptable) 633 Marmora Avenue 102 ARMENIA-AVENUE SOUTH TAMPA FL 33609 City Tampa 8. nits 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 abo 7/10/06 SIGN nt and title # applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the $\Box$ Due by September 6, 2006 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete Change Addition TITLE WALKLEY, ROBERT W NAME NAME STREET ADDRESS 102 ARMENIA AVENUE SOUTH STREET ADDRESS 633 Marmora Avenue CITY-ST-ZIP TAMPA, FL 33609 CITY-ST-ZIP Tampa, Fl. 33606 TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 leport is the 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 toxiced empty wind in specyte this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or or an attack the interval of the receiver of the corporation with an appears in Block 11 if changed, or or an attack the interval of the receiver of the corporation of the receiver of the receiver of the receiver of the corporation of the receiver o 5600 7/10/06 (813) SIGNATURE: FICER OR DIRECTOR

FILED

Jul 12, 2006 8:00 am

WALKLEY & WALKLEY, P.A.

ATTACHMENT SOUJO107

WALKLEY & WALKLEY, P.A.

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Bruce A. Walkley (1954-2001) Robert W. Walkley

ID# 01-0656219

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www.walkleylawfirm.com

July 10, 2006

Division of Corporations Post Office Box 1500 Tallahassee, Fl. 32302-1500

Re: FEI No. 01-0656219

To Whom It May Concern:

Please find enclosed the 2006 Annual Report together with our check for \$150.00. The business moved its located at the end of 2005 and did not receive the notice that the annual report was due was.

Please make a note of the correct address and advise if there is additional information required.

Thank you for your attention to this matter.

OBERT W.WALKLEY

RWW/rp Enclosures