

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000052258

1. Entity Name

MATERIALS OF NW FLA, INC.



Principal Place of Business

**1099 STATE HWY 83
DEFUNIAK SPRINGS, FL 32433**

Mailing Address

**1099 STATE HWY 83
DEFUNIAK SPRINGS, FL 32433**



04142006 No Chg-P CR2E034 (11/05)

4. FEI Number

51-0466474

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**WESTMORELAND, J. LOFTON
220 W GARDEN ST SUNTRUST TOWER 9TH FL
PENSACOLA, FL 32501**

**DO NOT WRITE
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)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10.

OFFICERS AND DIRECTORS

TITLE

D

NAME

BELL, LARRY H

STREET ADDRESS

1099 STATE HWY 83

CITY-ST-ZIP

DEFUNIAK SPRINGS, FL 32433

TITLE

ST

NAME

BELL, PERRY H

STREET ADDRESS

381 SHOEMAKER DR

CITY-ST-ZIP

DEFUNIAK SPRINGS, FL 32433

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

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STREET ADDRESS

CITY-ST-ZIP

000000514828
04/29/06-80188-004 158.75

**DO NOT WRITE
IN THIS SPACE**

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 report is true 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 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 filers empowered.

SIGNATURE: Perry H. Bell / Perry H. Bell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/06 850-892-0291

Date

Daytime Phone #