

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000052673

Entity Name: WALDRON TILE WORKS, INC.

FILED
Apr 20, 2006
Secretary of State

Current Principal Place of Business:

20768 SE SHERRY AVE
BLOUNTSTOWN, FL 32424

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 707
ALTHA, FL 32421

New Mailing Address:

20768 SE SHERRY AVE
BLOUNTSTOWN, FL 32424

FEI Number: 04-3756914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDRON, ROBERT B
20768 SE SHERRY AVE.
BLOUNTSTOWN, FL 32424 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: D () Delete
Name: WALDRON, ROBERT
Address: P. O. BOX 707
City-St-Zip: ALTHA, FL 32421

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WALDRON, ROBERT
Address: 20768 SE SHERRY AVE
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: O () Change (X) Addition
Name: WALDRON, TAMARA L OFFICER
Address: 20768 SE SHERRY AVE.
City-St-Zip: BLOUNTSTOWN, US 324240

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: TAMARA WALDRON

O

04/20/2006

Electronic Signature of Signing Officer or Director

Date