

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 22, 2007 8:00 am**  
**Secretary of State**

02-22-2007 90010 001 \*\*\*150.00

<b>DOCUMENT # P03000083594</b>					
<b>1. Entity Name</b> CDWA CO					
<b>Principal Place of Business</b> 705 FAIRVIEW DR FT WALTON BCH, FL 32547 US			<b>Mailing Address</b> 705 FAIRVIEW DR FT WALTON BCH, FL 32547 US		
<b>2. Principal Place of Business - NO P.O. Box #</b> <i>SAME</i>		<b>3. Mailing Address</b> <i>SAME</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		<b>4. FEI Number</b> 05-0580413			
Applied For		Not Applicable			
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  SCHMIDT, ANDREW JR. 705 FAIRVIEW DR FT WALTON BCH, FL 32547			<b>7. Name and Address of New Registered Agent</b>  Name: <i>N/A</i> Street Address (P.O. Box Number is Not Acceptable): City: <b>FL</b> Zip Code:		
<b>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.</b>  SIGNATURE: <i>N/A</i> (NOTE: Registered Agent signature required when reinstating) DATE:					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST SCHMIDT, ANDREW JR. 705 FAIRVIEW DR FT WALTON BCH, FL 32547 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<b>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 like empowered.</b>					
<b>SIGNATURE:</b> <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			20 FE 2007 <i>901-719-1660</i> <small>Date Daytime Phone #</small>		

ATTACHMENT

40022750

CDWA CO

~~705~~ 705 FAIRVIEW DR.  
FT. WALTON BCH. FL 32547

DOCUMENT # (PO3000083594)

ANDREW SCHMIDT

\$150. ANNUAL Report Notice