\$2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 27, 2006 08:00 AN DOCUMENT # P03000127795 Secretary of State 1. Entity Name DIANE WELCH FINANCE, INC. Principal Place of Business Mailing Address PO BOX 923 81 DIANE DR ORMOND BCH, FL 32176 DAYTONA BEACH, FL 32115 02202006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 51-0457092 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent EVANS, JAMES R DO NOT WRITE 322 SILVER BCH AVE DAYTONA BCH, FL 32118 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE WELCH, DIANE NAME STREET ADDRESS 81 DIANE DR CITY-ST-ZIP ORMOND BCH, FL 32176 TITLE 000000450632 03/10/06-80013-016 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TRILE NAME STREET ADDRESS CITY-ST-ZIP

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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.

(386) 252-0858

SIGNATURE: ALEANE C. WULL DIANE E. WELCH 2/21/05 (386)290 - 2968
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date Date Dayline Phone 4