## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 27, 2006 08:00 AM **Secretary of State** DOCUMENT # P03000128301 BAXTER CUSTOM WIRING INC. Principal Place of Business Malling Address 4721 E MOODY BLVD, STE 305 4721 E MOODY BLVD, STE 305 BUNNELL, FL 32110 BUNNELL, FL 32110 02152006 No Cho-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 52-2411043 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. DO NOT WRITE 1840 SW 22ND ST. 4TH FLOOR IN THIS SPACE MIAMI, FL 33145 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be $\Box$ Trust Fund Contribution. Added to Fees 10. OFFICEHS AND DIRECTORS 7777 F BAXTER, MASON NAME STREET ADDRESS 4721 E MOODY BLVD, STE 305 CITY-ST-ZIP BUNNELL, FL 32110 U00000536890 TITLE 05/08/05-80113-006 150.00 NAME BAXTER, DANIEL J STREET ADDRESS 4721 E MOODY BLVD, STE 305 CITY-ST-ZIP BUNNELL, FL 32110 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-77P IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS C/TY-57-ZIP ZZZFE NAME STREET ADDRESS CUY-ST-ZW

12. I hereby certify that the information supplied with this filling 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 it made under oath, that I am an officer or director of the curporation or the receiver of trustee empowered to exemption in the receiver of trustee empowered to exemption as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if

ME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment

SIGNATURE:

**FILED** 

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