

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013105

FILED
Apr 29, 2006
Secretary of State

Entity Name: MCDANIEL ASSOCIATES OF NWFL INCORPORATED

Current Principal Place of Business:

PO BOX 534
VALPARAISO, FL 32580

New Principal Place of Business:

Current Mailing Address:

PO BOX 534
VALPARAISO, FL 32580

New Mailing Address:

FEI Number: 71-0956769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKMAN, JAMES A
220 GOVERNMENT STREET SUITE 1
NICEVILLE, FL 32578 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: P () Delete
Name: MCDANIEL, DONALD W
Address: 368 WASHINGTON AVENUE
City-St-Zip: VALPARAISO, FL 32580

Title: D () Delete
Name: RICE, DONALD M JR
Address: 601 LEE AVE
City-St-Zip: CRESTVIEW, FL 32536 US

Title: D () Delete
Name: DUNAGAN, ROBBIE W
Address: 4600 RANGE ROAD
City-St-Zip: NICEVILLE, FL 32578

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: DIXION, GERALD W
Address: 326 CARMEL DRIVE LOT 21
City-St-Zip: FT WALTON BCH, FL 32547 US

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: DONALD MCDANIEL

PRES

04/29/2006

Electronic Signature of Signing Officer or Director

_____ Date