

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 07, 2006 8:00 am**  
**Secretary of State**

04-07-2006 90036 012 \*\*\*150.00

**DOCUMENT # P04000090121**

1. Entity Name  
**WALSH & WAX, INC.**



Principal Place of Business  
**2916 1ST ST  
VERO BEACH, FL 32968 US**

Mailing Address  
**2916 1ST ST  
VERO BEACH, FL 32968 US**

**50009917**



2. Principal Place of Business  
**887 Greenleaf Circle  
Suite, Apt. #, etc.  
Vero Beach, FL.**

3. Mailing Address  
**887 Greenleaf Circle  
Suite, Apt. #, etc.  
Vero Beach, FL.**

02242006 Chg-P CR2E034 (11/05)

City & State  
**32960 US**

City & State  
**32960 US**

4. FEI Number  
**20-1273960**

Applied For  
☐ Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WALSH, SEAN  
2916 1ST ST  
VERO BEACH, FL 32968**

7. Name and Address of New Registered Agent

Name **Sean Walsh**  
Street Address (P.O. Box Number is Not Acceptable)  
**887 Greenleaf Circle**  
**Vero Beach**  
City **FL** Zip Code **32960**

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 **Sean Walsh** DATE **3/1/06**  
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **WALSH, SEAN**  
STREET ADDRESS **2916 1ST ST**  
CITY-ST-ZIP **VERO BEACH, FL 32968**

TITLE **VPS** ☒ Delete  
NAME **WALSH, LAURA**  
STREET ADDRESS **2916 1ST ST**  
CITY-ST-ZIP **VERO BEACH, FL 32968**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☐ Addition  
NAME **Sean Walsh**  
STREET ADDRESS **887 Greenleaf Circle**  
CITY-ST-ZIP **Vero Beach, FL. 32960**

TITLE **Vice President** ☒ Change ☒ Addition  
NAME **Richard Granger**  
STREET ADDRESS **130 35th Sq. SW**  
CITY-ST-ZIP **Vero Beach, FL. 32968**

TITLE **Secretary/Treasurer** ☐ Change ☒ Addition  
NAME **Laura Walsh**  
STREET ADDRESS **887 Greenleaf Circle**  
CITY-ST-ZIP **Vero Beach, FL. 32960**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE: **Laura Walsh** DATE **3/1/06** (772) 299-6007  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR