

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091381

Entity Name: CW GRAFIX & DESIGNS, INC.

FILED  
Aug 15, 2006  
Secretary of State

## Current Principal Place of Business:

5207 N NEBRASKA AVE  
TAMPA, FL 33603

## New Principal Place of Business:

1748 ST. ANTHONY DR  
CLEARWATER, FL 33759

## Current Mailing Address:

5207 N NEBRASKA AVE  
TAMPA, FL 33603

## New Mailing Address:

PO BOX 4117  
CLEARWATER, FL 33758

FEI Number: 61-1469951

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WINTERS, CHAD L MR  
5207 N NEBRASKA AVE  
TAMPA, FL 33603 US

## Name and Address of New Registered Agent:

WINTERS, CHAD L MR  
1478 ST. ANTHONY DR  
CLEARWATER, FL 33759 US

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:

08/15/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: WINTERS, CHAD L  
Address: 5207 N NEBRASKA AVE  
City-St-Zip: TAMPA, FL 33603

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WINTERS, JOYCE E  
Address: 865 TREASURE LAKE  
City-St-Zip: DUBOIS, PA 15801

Title: V ( ) Change (X) Addition  
Name: WINTERS, CHAD L  
Address: 1748 ST. ANTHONY DR  
City-St-Zip: CLEARWATER, FL 33759

Title: T ( ) Change (X) Addition  
Name: SCARBROUGH, AMANDA L  
Address: 1748 ST. ANTHONY DR  
City-St-Zip: CLEARWATER, FL 33759

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: CHAD L WINTERS

V

08/15/2006

Electronic Signature of Signing Officer or Director

Date