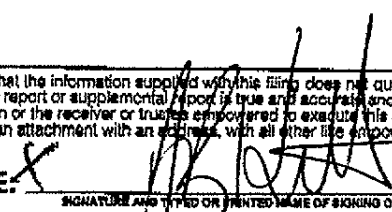


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000106340		
1. Entity Name WOODWERX, INC.		
Principal Place of Business 1126 SOUTH WATERVIEW DRIVE INVERNESS, FL 34450		Mailing Address 1126 SOUTH WATERVIEW DRIVE INVERNESS, FL 34450
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BATTEN, ROBERT E 1126 SOUTH WATERVIEW DRIVE INVERNESS, FL 34450		4. FEI Number 20-1381692 Applied For Not Applicable
5. 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.		5. Certificate of Status Desired ☒ \$8.75 Additional Fec Required
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable		DATE 05/15/06-80056-012 158.75
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 NAME STREET ADDRESS CITY-ST-ZIP	P BATTEN, ROBERT E 1126 SOUTH WATERVIEW DRIVE INVERNESS, FL 34450	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HUTCHINSON, NICK D 820 NORTH CHARLES AVENUE INVERNESS, FL 34452	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HITT, JONATHAN R 820 NORTH CHARLES AVENUE INVERNESS, FL 34452	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE 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 507, 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: 		x 4/28/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE