

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2007 8:00 am
Secretary of State

04-17-2007 90246 045 ***150.00

DOCUMENT # P04000132099 1. Entity Name W & D REMODELLING, INC.	
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Principal Place of Business 6736 CALLIE RD ORLANDO, FL 32818	Mailing Address 6736 CALLIE RD ORLANDO, FL 32818
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DO NOT WRITE IN THIS SPACE



01092007 No Chg-P CR2E034 (11/05)

4. FEI Number 74-3130817	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GERMAN, DONNA
6736 CALLIE RD
ORLANDO, FL 32818**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing) DATE

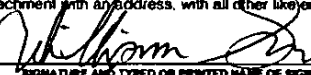
**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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 GERMAN, WILLIAM 6736 CALLIE RD ORLANDO, FL 32818
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GERMAN, DONNA 6736 CALLIE RD ORLANDO, FL 32818
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:  **4/29/07** **407 294/272**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR