2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000162425

1. Entity Name
WATSON OUTDOOR SERVICES, INC.

FILED Apr 07, 2006 08:00 AM Secretary of State

Principal Place of Business

3895 BRITTING DR DELAND, FL 32724 Mailing Address

3895 BRITTING DR DELAND, FL 32724



DO I	TON	WRITE	IN	THIS	SPA	CE
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03042000 110 City 1	0.65	012200+(11/00)		
4. FEI Number .		Applied For		
20-1951507		Not Applicable		
5. Certificate of Status Desired	± 🗆	\$8.75 Additional Fee Required		

5. Name and Address of Current Registered Agent

BAUER, KIRK T 223 S WOODLAND BLVD DELAND, FL 32720

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pations of registered agent.	urpose of changing its register	ed office or registered agent, or b	on, in the State of Flonda. I am tamiliar with, and accept		
SIGNATURE			d Agent signature required when reinstating) DATE			
	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	scing \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS	1			
TITLE NAME STREET ADDRESS CITY-SI-ZIP	DPT WATSON, CASEY 3895 BRITTING DR DELAND, FL 32724					
TITLE NAME STHEET ADDRESS CITY-ST-OP	DS WATSON, JAN 3895 BRITTING DR DELAND, FL 32724			U00000496679 04/22/06-80025-002 150.00		
TITLE NAME SIREET ADDRESS GTTY-ST-ZIP			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		IN	THIS SPACE		
TITLE NAME STREET ADDRESS GITY-ST-ZIP						
HITLE NAME STREET ADDRESS CHTY-SI-ZIP						
12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental peport is true and accurate and that my signature shall have the same legal effect as if made under oath, that if am an officer or director of the corporation or the receiver or truefled 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.						

NING OFFICER OR DIRECTOR