## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P05000029043

1. Entity Name CSL INDUSTRIES, INC.



**FILED** Apr 20, 2006 8:00 am Secretary of State 04-20-2006 90217 046 \*\*\*150.00

2519 WATERMILL DRIVE ORANGE PARK, FL 32073 US  2519 WATERMILL DRIVE ORANGE PARK, FL 32073 US  2519 WATERMILL DRIVE ORANGE PARK, FL 32073 US  2519 WATERMILL DRIVE City & State  City & S							See W. The	<b>7</b>						
Suite Apt #. etc.	Principal Place of Business 2519 WATERMILL DRIVE ORANGE PARK, FL 32073 US				2519 WATERMILL DRIVE				50014255					
City & State  Country  Country  Country  Country  Country  Country  Country  S. Cartificate of Status Defined   Set 75 Applicable   Set 75 Applica	2. Principal Place of Business				3. Mailing Address									
Zip	Suite, Apt. #, etc.				Suite, Apt. #, etc.				01112006	Chg-P	CR2E0	34 (11/05)		
Secondary   Country   Country   Country   Secondary	City & State			City	City & State				4. FEI Numbe	80-240	2B27			
Name    Street Address (P.O. Box Number is Not Acceptable)	Zip	Country			Zip Count				5. Certificate			\$8.75 Add	litional	
Name    Street Address (P O Box Number is Not Acceptable)	6 Name and Address of Current			Register	Registered Agent									
Street Address (P.O. Box Number is Not Acceptable)    City   FL   Zip Code		••••••												
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    Signature, Specially private international and the applicable   (NOTE Registered Agent synature recommond when rehislation)   DATE	2519 WATERMILL DRIVE						Street Address (P.O. Box Number is Not Acceptable)							
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, types or printed name of registered agent and title if applicable. (NOTE Registered Agent signature recurred when rendacing)    TILE NOWILL FEE IS \$150.00	ORANGE PARK, FL 320/3										T = 2			
SIGNATURE   Signature speak or grimted name of registered agent and life if applicable   (NOTE Registered Apart signature required when remainable)   DATE											FL	.   Zip Codi	e	
TITLE NAME CORANGE PARK, FL 32073   Delete   TITLE   CORANGE PARK FL 32073   Delete   TITLE   CORANGE PARK, FL 32073   DELete PARK, FL 320	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.													
## Anter May 1, 2006 Fee will be \$550.00   Trust Fund Contribution.   Added to Fees	SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE													
TITLE NAME LOPEZ, STEVEN W STRETADDRESS CITY-ST-ZIP CONTROL OF STEET ADDRESS CITY-ST-ZIP C	FILE ROWN FEE 13 \$150.00													
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12. Thereby certify that the information supplied with this filling does not qualify for the exemplants contained in Chapter 119, Profit as a first part of the profit and the information and the information and the profit and the information and the information and the profit and the information and the profit and the information and the inform		t certify that th	e information supplied w	th this filing	g does not qualify fo	or the ex	emptions conta	ained	in Chapter 119	9, Florida Statutes	I further cer	tify that the i	nformation	

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: STEVEN W. Lopez