

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000059252

FILED  
Jan 21, 2006  
Secretary of State

Entity Name: COMFORT WALK-IN BATH TUBS SE, INC

## Current Principal Place of Business:

3212 GULFGATE DR  
SARASOTA, FL 34231 US

## New Principal Place of Business:

6915 15TH STREET E  
203  
SARASOTA, FL 34243 US

## Current Mailing Address:

3212 GULFGATE DR  
SARASOTA, FL 34231 US

## New Mailing Address:

6915 15TH STREET E  
203  
SARASOTA, FL 34243 US

FEI Number: 20-2729990

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SOKOL, ARNOLD  
3212 GULFGATE DR  
SARASOTA, FL 34123 US

## Name and Address of New Registered Agent:

SOKOL, ARNOLD  
6915 15TH STREET E  
203  
SARASOTA, FL 34243 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:

01/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: SOKOL, ROBERT M  
Address: 3212 GULFGATE DR  
City-St-Zip: SARASOTA, FL 34231 US

Title: VPTD ( ) Delete  
Name: SOKOL, KIMBERLY L  
Address: 3212 GULFGATE DR  
City-St-Zip: SARASOTA, FL 34231 US

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: SOKOL, ROBERT M  
Address: 6915 15TH STREET E  
City-St-Zip: SARASOTA, FL 34243 US

Title: VPTD (X) Change ( ) Addition  
Name: SOKOL, ARNOLD A  
Address: 6915 15TH STREET E  
City-St-Zip: SARASOTA, FL 34243 US

Title: TRES ( ) Change (X) Addition  
Name: BONITATIBUS, LYNNE E  
Address: 6915 15TH STREET E  
City-St-Zip: SARASOTA, FL 34243

Title: SEC ( ) Change (X) Addition  
Name: SOKOL, KIMBERLY L  
Address: 6915 15TH STREET E  
City-St-Zip: SARASOTA, FL 34243

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: ROBERT SOKOL

PSD

01/21/2006

Electronic Signature of Signing Officer or Director

Date