## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113269

Entity Name: WAYSIDE INDUSTRIAL, INC.

**FILED** Apr 29, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4110 ENTERPRISE AVENUE SUITE 214 4110 ENTERPRISE AVENUE NAPLES, FL 34104

SUITE 214

NAPLES, FL 34104

**Current Mailing Address: New Mailing Address:** 

4110 ENTERPRISE AVENUE SUITE 214 4110 ENTERPRISE AVENUE NAPLES, FL 34104

SUITE 214

NAPLES, FL 34104

FEI Number: 20-3337975 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

BRAVERMAN, NEIL SULLIVAN, WILLIAM H 4110 ENTERPRISE AVENUE SUITE 214 4110 ENTÉRPRISE AVENUE NAPLES, FL 34104

SUITE 214

NAPLES, FL 34104 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: WILLIAM H SULLIVAN 04/29/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

(X) Change ( ) Addition Title: PRFS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete BRAVERMAN, NEIL Name: Name: BRAVERMAN, NEIL K

4110 ENTERPRISE AVENUE SUITE 214 4110 ENTERPRISE AVENUE SUITE 214 Address: Address:

City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES EL 34104

Title: VΡ Title: () Delete (X) Change ( ) Addition

Name: VAN METER, WILLIAM B Name: VAN METER, WILLIAM B 3400 FORT CHARLES DRIVE 3400 FORT CHARLES DRIVE Address: Address: NAPLES, FL 341028200 NAPLES, FL 341028200 City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition Title: () Delete

GRAFFY, PHILLIP Name: GRAFFY, PHILIP J Name: 5817 GLENHOME CIRCLE 5817 GLENHOME CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34119

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: WILLIAM H SULLIVAN **CFO** 04/29/2006