2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000148709

City-St-Zip:

SAINT PETERSBURG, FL 33702

Entity Name: WAGGIN' CRITTER . INC.

FILED Apr 20, 2006 Secretary of State

Littly Na	ille. VVAGGIN	CRITTER, INC.			
Current P	rincipal Place	e of Business:	New Principal Place o	New Principal Place of Business:	
8110 7TH STREET NORTH SAINT PETERSBURG, FL 33702			8424 4TH STREET NO	8424 4TH STREET NORTH	
			#J	** =	
			SAINT PETERSBURG,	SAINT PETERSBURG, FL 33702	
Current M	lailing Addre	ss:	New Mailing Address:	New Mailing Address:	
8110 7TH STREET NORTH SAINT PETERSBURG, FL 33702			8424 4TH STREET NO	8424 4TH STREET NORTH	
			# J	# J	
			SAINT PETERSBURG,	FL 33702	
FEI Number	: 20-3747998	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SAINT PE	STREET NOR TERSBURG, F	FL 33702 US	purpose of changing its registered	office or registered agent, or both,	
SIGNATU					
SICINATO		nic Signature of Registered Ag	ent	 Date	
El4: 0		0 0			
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	Р () Delete	Title: () Change ()Addition	
Name:	WELLS, TRAC		Name:		
Address:	8110 7TH STR		Address:		
City-St-Zip:	SAINT PETERS	SBURG, FL 33702	City-St-Zip:		
Title:	VP () Delete	Title: () Change () Addition	
Name:	WELLS, WILLI	AM D JR	Name:		
Address:	8110 7TH STR	EET NORTH	Address:		
City-St-Zip:	SAINT PETERS	SBURG, FL 33702	City-St-Zip:		
Title:	S () Delete	Title: () Change () Addition	
Name:	SMITH, DANIELLE S		Name:		
Address:	8110 7TH STR		Address:		

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.

City-St-Zip:

SIGNATURE: TRACEY A. WELLS P 04/20/2006