2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34858

City-St-Zip:

MOBILE, AL 36608 US

Entity Name: WELTANCO LINING INC.

FILED May 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3509 SYCAMORE LANE GULF BREEZE, FL 32561 US **Current Mailing Address: New Mailing Address:** 3509 SYCAMORE LANE GULF BREEZE, FL 32561 US FEI Number: 76-0332276 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition JACKSON, STEVE F PRESIDE Name: Name: 3509 SYCAMORE LANE Address: Address: City-St-Zip: GULF BREEZE, FL 32563 US City-St-Zip: () Delete Title: SVP Title: () Change () Addition ANGERHOLZER, JR., MAX VP Name: Name: 3770 RHONDA DR. N. Address: Address: MOBILE, AL 36608 US City-St-Zip: City-St-Zip: Title: Title: TRES () Delete () Change () Addition JACKSON, MONA TREASUR Name: Name: 3509 SYCAMORE LANE Address: Address: City-St-Zip: GULF BREEZE, FL 32563 US City-St-Zip: Title: SEC () Delete Title: () Change () Addition ANGERHOLZER, PAMELA J SECRETA Name: Name: Address: 3770 RHONDA DR. N. Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MAX ANGERHOLZER, JR. VP 05/13/2005