2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000054287

Entity Name: VAL WARD OLDSMOBILE, INC.

FILED Jan 16, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	MIAMI TRAIL S ERS, FL 3390				
Current Mailing Address:			New Mailing Address:		
	MIAMI TRAIL S ERS, FL 3390				
FEI Number	: 65-0426926	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
	IM MIAMI TRAIL S ERS, FL 3390				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financii	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (WARD, JR, V/ 12626 TAMIAI FORT MYERS	MI TRAIL S	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV (WARD, VALM 15725 GLENIS FT MYERS, F	SLE WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EDENFIELD,	OF PALMS #103	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VT (WARD, III, VA 15430 KILBIR FORT MYERS	NIE DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (GEDRA, JIM 12740 WOOD FORT MYERS		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JIM GEDRA S 01/16/2006