

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000070634

Entity Name: WM. ARTHUR AND ASSOCIATES, INC.

FILED
May 03, 2006
Secretary of State

Current Principal Place of Business:

1390 S DIXIE HWY
#2216
CORAL GABLES, FL 33146 US

Current Mailing Address:

1390 S DIXIE HWY
#2216
CORAL GABLES, FL 33146 US

New Principal Place of Business:

800 DOUGLAS ROAD
SUITE 303
CORAL GABLES, FL 33134 US

New Mailing Address:

800 DOUGLAS ROAD
SUITE 303
CORAL GABLES, FL 33134 US

FEI Number: 65-0527301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARTHUR, BRUCE A
800 DOUGLAS RD
SUITE 303
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: ARTHUR, WILLIAM F
Address: 1265 S. ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33146

Title: V () Delete
Name: ARTHUR, WILLIAM F
Address: 1265 S. ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: ARTHUR, WILLIAM H
Address: 800 DOUGLAS RD, #303
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARTHUR, WILLIAM F
Address: 1265 S. ALHAMBRA CIRCLE, UNIT B
City-St-Zip: CORAL GABLES, FL 33146

Title: V (X) Change () Addition
Name: ARTHUR, ALISON M
Address: 1265 S. ALHAMBRA CIRCLE, UNIT B
City-St-Zip: CORAL GABLES, FL 33146

Title: D (X) Change () Addition
Name: ARTHUR, WILLIAM H
Address: 800 DOUGLAS RD, #303
City-St-Zip: CORAL GABLES, FL 33134

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: ALISON M ARTHUR

V

05/03/2006

Electronic Signature of Signing Officer or Director

Date