


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007 08:00 A
Secretary of State

DOCUMENT # P94000078687 1. Entity Name WAULEE CORPORATION		
Principal Place of Business 21301 POWERLINE RD SUITE 312 BOCA RATON, FL 33433 US	Mailing Address 5410 HOMBERG DR SUITE A KNOXVILLE, TN 37919 US	
<h2>DO NOT WRITE IN THIS SPACE</h2>		
6. Name and Address of Current Registered Agent WALTERS, CLIFFORD L 802 11TH ST. WEST BRADENTON, FL 34205		
<h2>DO NOT WRITE IN THIS SPACE</h2>		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when re-installing) <small>Signature, typed or printed name of registered agent and title if applicable</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000581198 04/04/07-80032-016 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPT KAYDEN, BERNARD H 550 MAMARONECK AVE. #404 HARRISON, NY 10528	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV KAYDEN, MILDRED H 550 MAMARONECK AVE. #404 HARRISON, NY 10528	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS LAMBERT, SANDA K 550 MAMARONECK AVE. #404 HARRISON, NY 10528	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<h2>DO NOT WRITE IN THIS SPACE</h2>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Bernard H. Kayden</u> Bernard H. Kayden, President <u>3/21/07</u> (914) 381-1010 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		