2006 FOR PROFIT CORPORATION? **ANNUAL REPORT**

CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY+SI-7/P

Jun 21, 2006 8:00 am Secretary of State 05-15-2006 90042 003 ****55.00 DOCUMENT # P94000087246 06-21-2006 90003 004 ****95.00 LOUIS AND WARREN, INCORPORATED Principal Place of Business Mailing Address 40096554 1005 LAKE HOWARD DR SW 4685 OLD WINTER GARDEN RD. WINTER HAVEN, FL 33880 US ORLANDO, FL 32811 03222006 No Chq-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3287360 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VAN WINKLE, PHILIP R DO NOT WRITE 5454 PALM LAKE CIRCLE ORLANDO, FL 32819 IN THIS SPACE B. 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 Phillip Van Wintle 4-25-06 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ST THILE VAN WINKLE, PHILIP R NAME STREET ADDRESS 5454 PALM LAKE CIRCLE CITY-ST-ZIP ORLANDO, FL 32819 TITLE VAN WINKLE, PHILIP R NAME STREET ADDRESS 5454 PALM LAKE CIRCLE CITY-ST-ZIP ORLANDO, FL 32819 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP FILLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED

12. I hereby certify that the information supplied with this lilling 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 chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if the same of the corporation or the receiver of the same of the

4-95-00 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2006 FOR PROFIT CORPORATION

SIGNATURE

ATTACHMENT DOCUMENT # P94000087246 LOUIS AND WARREN, INCORPORATED Mailing Address Principal Place of Business 1005 LAKE HOWARD DR SW 4685 OLD WINTER GARDEN RD. WINTER HAVEN, FL 33880 ORLANDO, FL 32811 03222006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3287360 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent VAN WINKLE, PHILIP R DO NOT WRITE 5454 PALM LAKE CIRCLE ORLANDO, FL 32819 IN THIS SPACE 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. Van Winkle 4-92-06 (NOTE: Pegistered Agent signature required when renatating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. ST 11**1**1 F VAN WINKLE, PHILIP R NAME STREET ADDRESS 5454 PALM LAKE CIRCLE CITY-ST-ZIP ORLANDO, FL 32819 HILE VAN WINKLE, PHILIP R NAME 5454 PALM LAKE CIRCLE STREET ADORESS **ORLANDO, FL. 32819** CITY-ST-ZIP TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filting does not quality 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.

4-92-06

(40) 299 0299