2007 FOR PROFIT CORPORATION ANNIIAI REPORT

FILED Mar 12, 2007 08:00 A ate

	ANNO	AL IXELANI		_		·· ,	
DOCUMENT # P95000068701 1. Entity Name CFW FINANCIAL GROUP, INC.						Secretary of Sta	
Principat Plac 4625 LITTLE NEW PORT R		Mailing Address 4625 LITTLE RD NEW PORT RICHEY, FL 34655	5 US		1 (1151 1 51) 111) 111	#1 80 1/0 0 /0 4/0/2 18	17 1 891 (1881 1881
D		TE IN THIS SPA	CE	03082007 4. FEI Numbr 59-334		CR2E034	
2312 U.S.	6. Name and Address of Gur A, DAVID J HIGHWAY 19 FL 34690	vent Ragistered Agent			NOT W		
	ions of registered agent.	ent for the purpose of changing its register			th, in the State of Fl		illar with, and accept
FIL	Signature, typed or printed name of registered E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$5		i.00 May Be		DATE		
10.	OFFICERS	AND DIRECTORS	T				
HILE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, CHARLES F 4625 LITTLE RD NEW PORT RICHEY, FL 34						
NAME STREET ADDRESS CITY-ST-ZIP					UC 03/20)0000661)/07-800	954 63-017 150.00
NAME STREET ADDRESS CITY-ST-ZIP	,			DO	NOT W	RITE	
ITILE NAME STREET ADDRESS CITY-SI-ZIP				IN .	THIS SI	PACE	
TITLE HAME 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 507, 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: Chi 7 Wille

charles F. WAIKER SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/07

72 7-375-1112 Daytime Phone #