

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000012303 1. Entity Name NORWALK CORPORATION	
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Principal Place of Business C/O LAUREN MILLS 365 RIVER EDGE ROAD JUPITER, FL 33477	Mailing Address C/O LAUREN MILLS 365 RIVER EDGE ROAD JUPITER, FL 33477
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DO NOT WRITE IN THIS SPACE



02162006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0637068 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**MILLS, LAUREN
365 RIVER EDGE ROAD
JUPITER, FL 33477**

**DO NOT WRITE
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.

SIGNATURE *Lauren E. Mills* **PRESIDENT** *RLC* **4-7-06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U00000502023 04/25/06-80088-002 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD MILLS, LAUREN E 365 RIVER EDGE RD JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS MILLS, LAUREN E 365 RIVER EDGE RD JUPITER, FL 33477
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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 *Lauren E. Mills* **PRESIDENT** *4-7-06* *561-575-1627*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #