


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 15, 2007 8:00 am**  
**Secretary of State**

1/1

01-18-2007 90089 038 \*\*\*150.00

<b>DOCUMENT # P96000020430</b>		
1. Entity Name <b>D.W. ENTERPRISES INCORPORATED OF STUART</b>		
Principal Place of Business <b>1400 NE SAVANNA ROAD JENSEN BEACH, FL 34957</b>		Mailing Address <b>1400 NE SAVANNA ROAD JENSEN BEACH, FL 34957</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>WILSON, DON 1400 NE SAVANNA ROAD JENSEN BEACH, FL 34957</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>		
<b>FILE NOW!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, DON 1400 NE SAVANNA ROAD JENSEN BEACH, FL 34957	
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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: <u>X Don Wilson</u>		Date: <u>2/12/07</u> (772) 334-2858



01092007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0647185</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

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