2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000070651

City-St-Zip:

LAKE MARY, FL 32746 US

FILED Aug 17, 2006 Secretary of State

Entity Nar	me: WOR	(ERS OF FLORIDA, INC.					
Current P	rincipal Pla	ace of Business:	New P	New Principal Place of Business:			
930 WILLIS	STON PAR	K POINT DR.					
	RY, FL 327	46					
Current M	lailing Add	ress:	New M	New Mailing Address:			
P.O. BOX : LAKE MAF	954179 RY, FL 3279	954179					
FEI Number:	: 59-3423802	FEI Number Applied For	() FEI Number Not	Applicable ()	Certificate of Status Desire	d()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
HOCTOR, 215 N EOL ORLANDO		US					
	named ent e of Florida.	ity submits this statement f	or the purpose of changi	ng its registere	ed office or registered agent,	or both,	
SIGNATUF	RE:						
	Elect	ronic Signature of Register	ed Agent		Date		
		'.193(2)(b), F.S., the corporatio cing Trust Fund Contribution (notice.			
OFFICERS	S AND DIR	ECTORS:	ADDIT	IONS/CHANG	ES TO OFFICERS AND DIF	RECTORS:	
Title: Name: Address: City-St-Zip:		()Delete K A TON PARK POINT DR. (, FL 32746	Title: Name: Address: City-St-Z		(X) Change () Addition RK A STON PARK POINT DR. Y, FL 32746		
Title: Name: Address: City-St-Zip:		(X) Delete EPH M ITON PARK POINT DRIVE /, FL 32746 US	Title: Name: Address: City-St-Z		() Change () Addition		
Title: Name: Address:	CFO STANLEY, I 930 WILLIS	(X) Delete MICHAEL A TON PARK POINT DRIVE	Title: Name: Address:		() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: MARK A. LANG Ρ 08/17/2006