FILED Mar 23, 2007 8:00 am Secretary of State

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DOCUMEN	T # P9700007	'8556	S. C.

1. Entity Name PWD, INC. Principal Place of Business 391 FAIRWAY ISLES LANE 391 FAIRWAY ISLES LANE **BRADENTON FL 34212 BRADENTON FL 34212** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 6251 44Th ST.N 905 FAIRWAY COVE LN. 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 59-3468810 BRADENTON FL Not Applicable 342/2 Country \$8.75 Additional 5. Certificate of Status Desired TINELLAS 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WACHNER DALE T. WACHNER, DALE T 391 FAIRWAY ISLES LANE **BRADENTON FL 34212** City BRADENTON 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 DALE T. WACHNER ature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete mu. ☐ Change ☐ Addition THILE SCHINNERER, KRISTIN NAME NAME 14105 ENTRADA VERDE STREET ADDRESS STREET ADDRESS **ALAMO CA 94507** CITY-ST-ZIP CITY - S1- ZIP TIPLE Defete Change ☐ Addition WACHNER, TRENT NAMI 415 N.W. NORTH ST STREET ADDRESS STREET ADDRESS PULLMAN WA 99163 CITY-ST-ZIP CHY-SI-7P 11111 🔁 Change Addition ☐ Delete THE WACHNER, BALE SARAH 905 FAIRWAY COUPLIN #1 BRADENTON, FL 34212 WACHNER SARAHE MAME. -BSMC... 391 FAIRWAY ISLES LANE STRUCT ADDRESS STREET ADDRESS **BRADENTON FL 34212** CHY-SI-7P CDY-ST-7IP DIE □ Change ■ Addition TOTE ☐ Delete NAMI NAMI STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CHY-S1-ZIP Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 1000 ☐ Addition HILL ☐ Delete ☐ Change NAME NAME STREET ADDRESS STRUET ADDRESS CHY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 affect as if made under eath; 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 attackment with an address, with all other like empowered.

DALE T. WACHNER

61. Wacher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNS

SIGNATURE: