

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000081997

Entity Name: NORTHWEST FLORIDA DISTRIBUTORS, INC.

FILED  
Aug 31, 2005  
Secretary of State

**Current Principal Place of Business:**

1640 MLK BLVD  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

1020 W PIERSON DR  
LYNN HAVEN, FL 32444

**New Mailing Address:**

FEI Number: 59-3467467      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SCOTT, WELKER R  
1020 W PIERSON DR  
LYNN HAVEN, FL 32444    US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: SCOTT, WELKER RHEA  
Address: 1020 W PIERSON DR  
City-St-Zip: LYNN HAVEN, FL 32444

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: WELKER RHEA SCOTT

PR

08/31/2005

Electronic Signature of Signing Officer or Director

Date