2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 01, 2006 08:00 AM Secretary of State **DOCUMENT # P98000000951** 1. Entity Name WYATT, INC. Principal Place of Business Mailing Address 786 N. BEAL OFFICE PK. 786 N. BEAL OFFICE PK. SUITE 1B SUITE 1B FORT WALTON BEACH, FL 32547 FORT WALTON BEACH, FL 32547 No Cho-P CR2E034 (11/05) 02022008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3486392 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VIOLETTE, MARK A DO NOT WRITE 34990 EMERALD COAST PKWY **DESTIN, FL 32541** IN THIS SPACE . 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, typed or portiod regres of regretered again and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 1100000543063 05/13/06 80001-007 150.00 \$5.00 May Be Election Campaign Financing FILE NOW!!! FEE IS \$150,00 П Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 to. OFFICERS AND DIRECTORS TITLE NAME WYATT, DEREK E 10 RACETRACK ROAD NW STREET ACCRESS CATY-SI-ZIP FORT WALTON BEACH, FL 32547 WYATT, KRISTEN L MARIE STREET ADDRESS 10 RACETRACK ROAD NW CITY-ST-ZP FORT WALTON BEACH, FL 32547 TITLE REALIE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADORESS सा४-डा-स STREET ADDRESS CTTY-ST-ZIP NAME STREET ADDRESS C!!Y-51-Z!! 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 118, 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 dath; that if 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.

OF SIGHING OFFICER OR DIRECTOR

FILED