

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025881

FILED  
May 08, 2006  
Secretary of State

Entity Name: AMERICAN WELDING & DESIGN, INC.

**Current Principal Place of Business:**

2532 NW 33RD AVE  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

**Current Mailing Address:**

2532 NW 33RD AVE  
OKEECHOBEE, FL 34972

**New Mailing Address:**

FEI Number: 65-0900294      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FINANCIAL FOUNDATIONS, INC.  
2843 THAXTON DRIVE, #37  
PALM HARBOR, FL 34684      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: ACHESON-NIELSEN, GAIL M  
Address: 2601 N.W. 33RD AVENUE  
City-St-Zip: OKEECHOBEE, FL 34972

Title: VP      ( ) Delete  
Name: ACHESON-NIELSON, TED F  
Address: 2601 NW 33RD AVE.  
City-St-Zip: OKEECHOBEE, FL 34972

Title: S      ( ) Delete  
Name: HAZELLIEF, SHELENE M  
Address: 2532 NW 33RD AVE  
City-St-Zip: OKEECHOBEE, FL 34972

Title: Y      ( ) Delete  
Name: HAZELLIEF, TRAVIS  
Address: 2532 NW 33RD AVE  
City-St-Zip: OKEECHOBEE, FL 34972

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

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

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

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

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

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.

SIGNATURE: GAIL M. ACHESON-NIELSEN

P

05/08/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date