2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V02699

Entity Name: WALTZ, INC.

Address:

City-St-Zip:

3042 QUASAR DR

CRESTVIEW, FL 32539

FILED Jul 08, 2008 Secretary of State

•	,,			
Current Principal Place of Business:			New Principal Place	e of Business:
178 JOHN CRESTVIE	I KING RD EW, FL 32539			
Current Mailing Address:			New Mailing Addre	ss:
178 JOHN CRESTVIE	I KING RD EW, FL 32539			
FEI Number	: 59-3100847	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:
CRESTVI	ONIAL CIRCLE EW, FL 32539	US ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both
	e of Florida.	,		
SIGNATUI				
	Electroni	c Signature of Registered Age	ent	Date
		(2)(b), F.S., the corporation did no Trust Fund Contribution ().	t receive the prior notice.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	C () I TEW, GORDON 3096 COLONIAL CRESTVIEW, FL	CIR	Title: Name: Address: City-St-Zip:	() Change() Addition
Title: Name: Address: City-St-Zip:	P () I TEW, AARON M. 3007 COLONIAL CRESTVIEW, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	STD () I TEW, VIRGINIA: 3096 COLONIAL CRESTVIEW, FL	CIR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPD () I TEW, JOSH 3096 COLONIAL CRESTVIEW, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	VPD () I TOOLAN, JERI T	Delete EW	Title: Name:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: AARON TEW P 07/08/2008