

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 272405

FILED
Apr 27, 2007
Secretary of State

Entity Name: PLANTATION LUMBER, INC.

Current Principal Place of Business:

545 MACLAY LANE
P O BOX 12457, ZIP 32317
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

545 MACLAY RD,
TALLAHASSEE, FL 32312 US

Current Mailing Address:

545 MACLAY RD
545 MACLAY LANE
TALLAHASSEE, FL 32312 US

New Mailing Address:

545 MACLAY RD
TALLAHASSEE, FL 32312 US

FEI Number: 59-1009070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLUESENKAMP, GORDON J., JR.
545 MACLAY LANE
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

GLUESENKAMP, GORDON J., JR.
545 MACLAY RD.
TALLAHASSEE, FL 32312 US

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:

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: GLUESENKAMP, JOSEPHI, NE
Address: 545 MACLAY LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VDT () Delete
Name: GLUESENKAMP, G J, JR,
Address: 545 MACLAY LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP () Delete
Name: GLUESENKAMP, GORDON J. III
Address: 1484 MARION AVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: PD () Delete
Name: GLUESENKAMP, BENJAMIN D
Address: 545 MACLAY LANE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: GLUESENKAMP, JOSEPHI, NE
Address: 545 MACLAY RD.
City-St-Zip: TALLAHASSEE, FL 32312

Title: VDT (X) Change () Addition
Name: GLUESENKAMP, G J, JR,
Address: 545 MACLAY RD.
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: PD (X) Change () Addition
Name: GLUESENKAMP, BENJAMIN D
Address: 545 MACLAY RD.
City-St-Zip: TALLAHASSEE, FL 32312

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.

SIGNATURE: G.J. GLUESENKAMP, JR.

VP

04/27/2007

Electronic Signature of Signing Officer or Director

Date