2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 857612

Title:

Name: Address:

City-St-Zip:

Entity Name: F & W FORESTRY SERVICES, INC.

FILED Apr 14, 2006 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
1310 OAKF P.O. BOX 3 ALBANY, G	3610					
Current Mailing Address:			New Mail	New Mailing Address:		
1310 OAKE P.O. BOX 3 ALBANY, G	3610					
FEI Number:	58-0971978	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
WEBER, RUSSELL D 3600 NW 43RD STREET SUITE E-4 GAINESVILLE, FL 32606 US			4631 NW SUITE 102	WEBER, RUSSELL D 4631 NW 53RD AVENUE SUITE 102 GAINESVILLE, FL 32606 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: RUSSELL D. WEBER				04/14/2006		
Electronic Signature of Registered Agent			nt	Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	EVPD () ROUTHIER, ROI 117 MOCK ROA SYLVESTER, G	D	Title: Name: Address: City-St-Zip:	(()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () BULLOCK, VER 2404 NOTTINGH ALBANY, GA		Title: Name: Address: City-St-Zip:	S (BULLOCK, VI 2404 NOTTIN ALBANY, GA	IGHAM WAY	
Title: Name: Address: City-St-Zip:	PD () THOMAS, MARS 5015 BARRING ALBANY, GA	•	Title: Name: Address: City-St-Zip:	PD (THOMAS, MA 5015 BARRIN ALBANY, GA	NGTON	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: VERDIE BULLOCK S 04/14/2006

() Delete

SHIVER, KATHERINE E

2605 BRITTANY ROAD

ALBANY, GA 31707

(X) Change () Addition

SHIVER, KATHERINE E

2605 BRITTANY ROAD

ALBANY, GA 31721