


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90093 016 ***150.00

DOCUMENT # F95000001680 1. Entity Name SENENICH WOOD PROPELLER COMPANY, INC.					
Principal Place of Business 2008 WOOD CT. PLANT CITY, FL 33567 US			Mailing Address 4601 FORBES BLVD. SUITE 120 LANHAM, MD 20706 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 120 Sallie H Dr			
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite A			
City & State		City & State Stevensville MD			
Zip	Country	Zip 21666	Country USA	4. FEI Number 59-3305026	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ROWELL, DONALD J 4304 LONGFELLOW DRIVE PLANT CITY, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SULLIVAN, DONNA 4601 FORBES BLVD LANHAM, MD 20706	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Sullivan, Donna 120 Sallie H Dr Ste A Stevensville MD 21666 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO HOZIK, JOHN 4601 FORBES BLVD., SUITE 120 LANHAM, MD 20706	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO Hozik, John 120 Sallie H Dr Ste A Stevensville MD 21666 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BUTCHER, MCBEE 4601 FORBES BLVD., SUITE 120 LANHAM, MD 20706	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Butcher, MCBEE 120 Sallie H Dr Ste A Stevensville MD 21666 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BUTCHER IV, HOWARD 4601 FORBES BLVD., STE 1205 LANHAM, MD 20706	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Butcher IV, Howard 120 Sallie H Dr Ste A Stevensville MD 21666 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BUTCHER, JONATHAN 4601 FORBES BLVD., SUITE 120 LANHAM, MD 20706	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Butcher, Jonathan 120 Sallie H Dr Ste A Stevensville MD 21666 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/30/07 410 6043 780 <small>Date Daytime Phone #</small>		