2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

DOCUMENT# P06000095204

Entity Name: LAWSON CARPENTRY INC.

Current Principal Place of Business:

5703 LEGACY CRESCENT PLACE
UNIT 204
RIVERVIEW, FL 33569 US

New Principal Place of Business:

3609 FORAY LN
NEW PORT RICHEY, FL 34655 US

Current Mailing Address:

5703 LEGACY CRESCENT PLACE
UNIT 204
RIVERVIEW, FL 33569 US

New Mailing Address:

3609 FORAY LN
NEW PORT RICHEY, FL 34655 US

FEI Number: 20-5234566 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAWSON, JASON
5703 LEGACY CRESCENT PLACE
UNIT 204
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

LAWSON, JASON
3609 FORAY LN
NEW PORT RICHEY, FL 34655 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: JASON J LAWSON 04/22/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete
Name: LAWSON, JASON
Address: 5703 LEGACY CRESCENT PLACE UNIT 204
City-St-Zip: RIVERVIEW, FL 33569 US

Title: P ( ) Delete
Name: LAWSON, JASON
Address: 5703 LEGACY CRESCENT PLACE UNIT 204
City-St-Zip: RIVERVIEW, FL 33569 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition
Name: LAWSON, JASON
Address: 3609 FORAY LN
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: P (X) Change ( ) Addition
Name: LAWSON, JASON
Address: 3609 FORAY LN
City-St-Zip: NEW PORT RICHEY, FL 34655 US

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: JASON J LAWSON P 04/22/2008
Electronic Signature of Signing Officer or Director Date