2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000056314

Entity Name: FORESTECH CONSULTING, INC.

FILED Jun 26, 2007 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
316 WILLIAMS STREET TALLAHASSEE, FL 32303				3059 HIGHLAND OAKS TERRACE TALLAHASSEE, FL 32301	
Current Mailing Address:			New Mailing Address:		
316 WILLIAMS STREET TALLAHASSEE, FL 32303			3059 HIGHLAND OAKS TERRACE TALLAHASSEE, FL 32301		
FEI Number:	: 59-3524763	FEI Number Applied For ()	FEI Number Not Applicable()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Addres	ss of New Registered Agent:	
	EGA DR SSEE, FL 323			and office an acciptored arount on both	
	named entity e of Florida.	submits this statement for the p	urpose of changing its regist	ered office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	nt	Date	
In accordan	ce with s. 607.1	93(2)(b), F.S., the corporation did not	receive the prior notice.		
	-	g Trust Fund Contribution ().	ADDITIONS/CHAI	NCES TO DEFICEDS AND DIDECTOR	
OFFICER	S AND DIREC	ioks.	ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTOR	
Title:	,) Delete	Title:	() Change () Addition	
Name:	MILLIGAN, MA		Name:		
Address: City-St-Zip:	3115 ORTEGA TALLAHASSE	E, FL 323121818	Address: City-St-Zip:		
	5 /	``		() O () A LEE	
Title:	•) Delete	Title:	() Change () Addition	
Name: Address:	MILLIGAN, MA 3115 ORTEGA		Name: Address:		
City-St-Zip:		E, FL 323121818	City-St-Zip:		
Title:	CFO () Delete	Title:	() Change () Addition	
Name:	DAVIS, RICHA		Name:	() change () / taution	
Address:	,	L SCOTT DRIVE	Address:		
City-St-Zip:	TALLAHASSE	E, FL 32309	City-St-Zip:		
Title:	CVSD () Delete	Title:	() Change () Addition	
Name:	DAVIS, RICHA	RD III	Name:		
Address:	5995 COLONE	L SCOTT DRIVE	Address:		
City-St-Zip:	TALLAHASSE	E, FL 32309	City-St-Zip:		
Title:	TD () Delete	Title:	() Change () Addition	
Name:	HOLLY, BRIAN		Name:		
Address:	114 TIVOLI PA		Address:		
City-St-Zip:	CENTERVILLE	E, GA 31028	City-St-Zip:		

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: RICHARD DAVIS CVSD 06/26/2007