

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 650978

FILED
Feb 10, 2003
Secretary of State

Entity Name: K & A LUMBER COMPANY, INC.

Current Principal Place of Business:

1001 W. MOWRY DRIVE
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

1001 W. MOWRY DRIVE
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 59-1964408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JACKSON, RICHARD
Address: 1001 W. MOWRY DRIVE
City-St-Zip: HOMESTEAD, FL 33030

Title: TSVD () Delete
Name: JACKSON, RICHARD S III
Address: 1001 W. MOWRY DRIVE
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JACKSON, RICHARD S II
Address: 1001 W. MOWRY DRIVE
City-St-Zip: HOMESTEAD, FL 33030

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 S. JACKSON, III

PD

02/10/2003

Electronic Signature of Signing Officer or Director

_____ Date