

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F49936

**Entity Name:** SUNBELT FOREST PRODUCTS CORPORATION

**Current Principal Place of Business:**

U S HIGHWAY 17 & SPIRIT LAKE RD  
6106 SPIRIT LAKE ROAD  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

U S HIGHWAY 17 & SPIRIT LAKE RD  
P O BOX 1218  
BARTOW, FL 33830

**FEI Number:** 59-2156058

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FLECTCHER, CASEY A  
HWY 17 & SPIRIT LAKE RD  
BARTOW, FL 33830 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title ASST. TREASURER  
Name GRUBBS, TED M  
Address 1470 US HWY 17 SOUTH  
City-State-Zip: BARTOW FL 33830

Title PRESIDENT  
Name DELLE DONNE, KEN F  
Address US HWY 17 & SPIRIT LAKE RD  
City-State-Zip: BARTOW FL 33830

Title ASST. SECRETARY  
Name NOYOTA, RICHARD  
Address 1470 US HWY 17 SOUTH  
City-State-Zip: BARTOW FL 33830

Title VP  
Name WALLACE, HOWE Q  
Address US HWY 17 & SPIRIT LK RD  
City-State-Zip: BARTOW FL

Title TREASURER  
Name FLETCHER, CASEY A  
Address US HWY 17 & SPIRIT LAKE RD  
City-State-Zip: BARTOW FL

Title ASST. TREASURER  
Name HASTINGS, KEN  
Address US HWY 17 & SPIRIT LAKE ROAD  
City-State-Zip: BARTOW FL 33830

*I hereby 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 all other like empowered.*

**SIGNATURE:** KEN HASTINGS

ASST. TREASURER

01/13/2015

Electronic Signature of Signing Officer/Director Detail

Date