## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 157015**

Entity Name: HAROLD C. ANDERSON LUMBER CO INC

FILED Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** ANDERSON LUMBER 666 49TH ST SOUTH ST PETERSBURG, FL 33707 **Current Mailing Address: New Mailing Address:** JEANNETTE ANDERSON 666 49TH STREET SOUTH SAINT PETERSBURG, FL 33707 FEI Number: 59-0594217 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDERSON, JEANNETTE M 206 VALENCIA CIRCLE NORTH US SAINT PETERSBURG, FL 33716 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition ANDERSON, F. CHRISTI, AN Name: Name: 666 49TH STREET SOUTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33707 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: LOGAN, LEANNE F. Name: 3043 EVENING WIND STREET Address: Address: HENDERSON, NV 89052 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: PD () Change () Addition ANDERSON, JEANNETTE, M. Name: Name: 206 VALENCIA CIRCLE NORTH Address: Address: SAINT PETERSBURG, FL 33716 City-St-Zip: City-St-Zip: Title: SD () Delete Title: () Change () Addition BRAIN, DEBRA Name: Name: Address: 1570 ROCK CRESS PATH Address: City-St-Zip: CRYSTAL RIVER, FL 34429 City-St-Zip: Title: Title: () Delete () Change () Addition MILLER, ROBERT M Name: Name: 2755 QUAIL HOLLOW RD W Address: Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: Title: () Delete Title: () Change () Addition MILLER, RICHARD W Name: Name: Address: 8220-28TH AVENUE NORTH Address: City-St-Zip: City-St-Zip: SAINT PETERSBURG, FL 33710

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: FREDERICK C ANDERSON VD 04/30/2008