

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 165952

FILED
Feb 10, 2006
Secretary of State

Entity Name: DIXIE PLYWOOD COMPANY OF TAMPA, INC.

Current Principal Place of Business:

SOUTH END OF WEST LATHROP AVENUE
P.O. BOX 1408
SAVANNAH, GA 31402

New Principal Place of Business:

S END OLD WEST LATHROP AVENUE
P.O. BOX 1408
SAVANNAH, GA 31402

Current Mailing Address:

SOUTH END OF WEST LATHROP AVENUE
P.O. BOX 1408
SAVANNAH, GA 31402

New Mailing Address:

S END OLD WEST LATHROP AVENUE
P.O. BOX 1408
SAVANNAH, GA 31402

FEI Number: 59-0657530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORHOLT, ERICK A
344 ALL AMERICAN BLVD
ORLANDO, FL 32810 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: VD () Delete
Name: BRADLEY, W WALDO,
Address: S END OLD WEST LATHROP AVNEUE
City-St-Zip: SAVANNAH, GA 31415

Title: PD () Delete
Name: BRADLEY, DANIEL H,
Address: S END OLD WEST LATHROP AVENUE
City-St-Zip: SAVANNAH, GA 31415

Title: D () Delete
Name: WHEELER, JANE B,
Address: 35 PALISADES ROAD NE
City-St-Zip: ATLANTA, GA 30309

Title: S () Delete
Name: HANCOCK, REBECCA L
Address: S END OLD WEST LATHROP AVENUE
City-St-Zip: SAVANNAH, GA 31415

Title: VT () Delete
Name: GENTRY, MARK,
Address: S END OLD WEST LATHROP AVENUE
City-St-Zip: SAVANNAH, GA 31415

Title: V () Delete
Name: WILSON, DAVID G
Address: S END OLD WEST LATHROP AVENUE
City-St-Zip: SAVANNAH, GA 31415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: BRADLEY, W WALDO,
Address: S END OLD WEST LATHROP AVENUE
City-St-Zip: SAVANNAH, GA 31415

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

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

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

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

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 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: REBECCA L. HANCOCK

S

02/10/2006

Electronic Signature of Signing Officer or Director

_____ Date