

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 193975

FILED  
Feb 04, 2008  
Secretary of State

Entity Name: BAGWELL LUMBER COMPANY

**Current Principal Place of Business:**

630 S. SCENIC HIGHWAY  
FROSTPROOF, FL 33843

**New Principal Place of Business:**

**Current Mailing Address:**

630 S. SCENIC HIGHWAY  
FROSTPROOF, FL 33843

**New Mailing Address:**

FEI Number: 59-0781837      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BAGWELL, FRANKLIN  
150 HWY 630 EAST  
FROSTPROOF, FL 33843      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: P ( ) Delete  
Name: BAGWELL, FRANKLIN, J, R.  
Address: 150 KELLY ROAD  
City-St-Zip: FROSTPROOF, FL

Title: ST ( ) Delete  
Name: BAGWELL, JUDY,  
Address: 150 KELLY ROAD  
City-St-Zip: FROSTPROOF, FL 00000,

Title: ST ( ) Delete  
Name: BAGWELL, PEGGY,  
Address: 150 HWY 630 EAST  
City-St-Zip: FROSTPROOF, FL 33843

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: FRANKLIN BAGWELL

RA

02/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date