2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2006
Secretary of State

DOCUMENT# 379633

Entity Name: WOODCRAFT MANUFACTURING, INC.

Current Principal Place of Business:

4212 GULF BREEZE PKWY
GULF BREEZE, FL 32561

New Principal Place of Business:

4212 GULF BREEZE PKWY
GULF BREEZE, FL 32563

Current Mailing Address:

4212 GULF BREEZE PKWY
GULF BREEZE, FL 32561

New Mailing Address:

4212 GULF BREEZE PKWY
GULF BREEZE, FL 32563

FEI Number: 59-1346336 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDER, FREDERICK PORTER
4212 GULF BREEZE PKWY
GULF BREEZE, FL 32561 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: EDER, FREDERICK PORT, ER
Address: 4212 GULF BREEZE PKWY
City-St-Zip: GULF BREEZE, FL 32561

Title: VP (X) Delete
Name: HITCHCOCK, ROBERT M,
Address: 6251 CALLE DE HIDALGO
City-St-Zip: NAVARRE, FL 32566

Title: ST ( ) Delete
Name: EDER, MARY M.,
Address: 4212 GULF BREEZE PKWY.
City-St-Zip: GULF BREEZE, FL 32561

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/VP (X) Change ( ) Addition
Name: EDER, FREDERICK PORT, ER
Address: 4212 GULF BREEZE PKWY
City-St-Zip: GULF BREEZE, FL 32561

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: MARY M. EDER ST 01/04/2006

Electronic Signature of Signing Officer or Director — Date