


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2006 8:00 am
Secretary of State

03-10-2006 90003 029 ***158.75

DOCUMENT # 492189 1. Entity Name BISHOP WOODS, INC.																																																																																																																																			
Principal Place of Business 1418 GA. HWY 133 S. MOULTRIE, GA 31768			Mailing Address P.O. BOX 803 MOULTRIE, GA 31776																																																																																																																																
2. Principal Place of Business 2280 GA HWY 133 S		3. Mailing Address Suite, Apt. #, etc.																																																																																																																																	
City & State Moultrie, GA 31788		City & State																																																																																																																																	
Zip	Country	Zip	Country																																																																																																																																
6. Name and Address of Current Registered Agent QUIGG, JESSE 859 OAK PARK RD SOPCHOPPY, FL 32358				7. Name and Address of New Registered Agent Name W. E. Bishop, Jr. Street Address (P.O. Box Number is Not Acceptable) 7743 SW SR 200 City Ocala FL Zip Code 34476																																																																																																																															
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>W. E. Bishop, Jr.</u> W. E. Bishop, Jr. March 7, 2006 <small>Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when transferring)</small> <small>DATE</small>																																																																																																																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">VSD</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td>BISHOP, RONALD N. SR.</td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td>466 SUMNER RD</td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MOULTRIE, GA</td> <td></td> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td>BISHOP, MARVIN L SR</td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td>216 HORSESHOE DR</td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MOULTRIE, GA 31788</td> <td></td> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>PTD</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td>BISHOP, NORRIS</td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td>466 SUMNER ROAD</td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MOULTRIE, GA 31776</td> <td></td> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	VSD	<input type="checkbox"/> Delete	TITLE			NAME	BISHOP, RONALD N. SR.		NAME			STREET ADDRESS	466 SUMNER RD		STREET ADDRESS			CITY-ST-ZIP	MOULTRIE, GA		CITY-ST-ZIP			TITLE	D	<input type="checkbox"/> Delete	TITLE			NAME	BISHOP, MARVIN L SR		NAME			STREET ADDRESS	216 HORSESHOE DR		STREET ADDRESS			CITY-ST-ZIP	MOULTRIE, GA 31788		CITY-ST-ZIP			TITLE	PTD	<input type="checkbox"/> Delete	TITLE			NAME	BISHOP, NORRIS		NAME			STREET ADDRESS	466 SUMNER ROAD		STREET ADDRESS			CITY-ST-ZIP	MOULTRIE, GA 31776		CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																			
SIGNATURE: <u>W. E. Bishop</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>3-7-06</u> Daytime Phone # <u>229-890-1186</u>																																																																																																																																