2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 596773

Entity Name: KIMAL LUMBER COMPANY

FILED Jan 07, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
400 RIVERVIEW DRIVE NOKOMIS, FL 342748177 Current Mailing Address:			400 RIVERVIEW DRIVE NOKOMIS, FL 342741177 New Mailing Address:	
FEI Number	: 59-2063281	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
VENICE, F		ubmits this statement for the	purpose of changing its registere	d office or registered agent, or bot
SIGNATU				
	Electroni	c Signature of Registered Ag	ent	Date
Election Ca	mpaign Financing	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	PC () BAVRY, MR AL I 4722 BEACON D SARASOTA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DVT () PAVKOVICH, MF 908 S. DORAL L VENICE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DV () ROSS, DAVID L. 401 BAYSHORE VENICE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DV () WERSEL, WILL 7585 MANASOT, ENGLEWOOD, F	A KEY RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	D () MILLER, JOHN 3 8701 GATOR CF		Title: Name: Address:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: KIM PAVKOVICH DVT 01/07/2004

SARASOTA, FL

City-St-Zip: