

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 596773

FILED
Jan 14, 2009
Secretary of State

Entity Name: KIMAL LUMBER COMPANY

Current Principal Place of Business:

400 RIVERVIEW DRIVE
NOKOMIS, FL 342741177

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1177
NOKOMIS, FL 342741177

New Mailing Address:

FEI Number: 59-2063281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAZEN, RICHARD J
2607 BAYSHORE ROAD
NOKOMIS, FL 34275 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: PC () Delete
Name: BAVRY, MR AL E,
Address: 13434 HERITAGE WAY
City-St-Zip: SARASOTA, FL 34240

Title: DVT () Delete
Name: PAVKOVICH, MR KIM,
Address: 908 S. DORAL LANE
City-St-Zip: VENICE, FL 34293

Title: DV () Delete
Name: ROSS, DAVID L.,
Address: 401 BAYSHORE DRIVE
City-St-Zip: VENICE, FL 34285

Title: DV () Delete
Name: WERSEL, WILLIAM,
Address: 410 S CASEY KEY ROAD
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: MILLER, JOHN J.,
Address: 2989 SEASONS BLVD
City-St-Zip: SARASOTA, FL 34240

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:

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: KIM PAVKOVICH

DVT

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date