## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 667345** 

FILED Mar 25, 2009 Secretary of State

Entity Name: FLORIDA LUMBER INSPECTION SERVICE, INC.

urrent P	micipai Flace	e of Business:	New Principal Place	OI DUSINESS:
641 SIGN ONYERS	MAN RD S, GA 30012	US		
urrent N	lailing Addre	ss:	New Mailing Address	s:
.O. BOX ONYERS	919 S, GA 30012	US		
El Number	: 59-2004213	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	d Address of (	Current Registered Agent:	Name and Address of	of New Registered Agent:
	K TREE RD L 32347 US	S		
he above	e named entity e of Florida.	submits this statement for the բ	ourpose of changing its registere	d office or registered agent, or both,
he above	e of Florida.	submits this statement for the բ	ourpose of changing its registere	d office or registered agent, or both,
he above the State	e of Florida. RE:	submits this statement for the particles of Registered Agric Signature of Registered Agr		d office or registered agent, or both,  Date
ne above the State	e of Florida.  RE: Electroi	·		
he above the State IGNATUI	e of Florida.  RE: Electroi	nic Signature of Registered Ago	ent	
he above the State IGNATUI	e of Florida.  RE: Electrol  mpaign Financin  S AND DIREC	nic Signature of Registered Ago g Trust Fund Contribution ( ). CTORS: ) Delete DNALD L RD	ent	Date
he above the State IGNATUI ection Car FFICER ttle: ame: dress:	e of Florida.  RE:  Electrol  mpaign Financin  S AND DIREC  PT ( WILLIAMS, RO 1641 SIGMAN CONYERS, GA	nic Signature of Registered Agr g Trust Fund Contribution ( ). ETORS:  ) Delete DNALD L RD A 30012 US  ) Delete MES L RD	ADDITIONS/CHANGI Title: Name: Address:	Date  ES TO OFFICERS AND DIRECTOR

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: TODD P GREER D 03/25/2009