
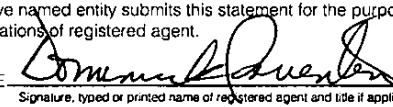
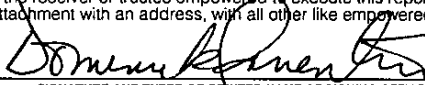


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 08, 2005 8:00 am**  
**Secretary of State**

02-08-2005 90019 048 \*\*\*150.00

<b>DOCUMENT # F00000001523</b> 1. Entity Name <b>DUDLEY SAWMILL CORPORATION</b>					
Principal Place of Business <b>581705 WHITE OAK ROAD YULEE, FL 32097 US</b>			Mailing Address <b>581705 WHITE OAK ROAD YULEE, FL 32097 US</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>13-4040455</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>DAVIS, WILLIAM H 581705 WHITE OAK ROAD YULEE, FL 32097</b>				7. Name and Address of New Registered Agent Name <b>Dominick Sorrentino</b> Street Address (P.O. Box Number is Not Acceptable) <b>581705 White Oak Rd</b> City <b>Yulee</b> <b>FL</b> Zip Code <b>32097</b>	
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 		<b>Dominick Sorrentino</b>		<b>01/31/05</b>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE	CD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BERGREEN, BERNARD D		NAME		
STREET ADDRESS	111 WEST 50TH STREET		STREET ADDRESS		
CITY-ST-ZIP	NEW YORK, NY 1020		CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DAVIS, WILLIAM H		NAME		
STREET ADDRESS	581705 WHITE OAK ROAD		STREET ADDRESS		
CITY-ST-ZIP	YULEE, FL 32097		CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MOODY, NATALIE P		NAME		
STREET ADDRESS	111 WEST 50TH STREET		STREET ADDRESS		
CITY-ST-ZIP	NEW YORK, NY 1020		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CROPPER, STEPHEN W		NAME		
STREET ADDRESS	111 WEST 50TH STREET		STREET ADDRESS		
CITY-ST-ZIP	NEW YORK, NY 1020		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GARRETT, VICTOR		NAME		
STREET ADDRESS	581705 WHITE OAK ROAD		STREET ADDRESS		
CITY-ST-ZIP	YULEE, FL 32097		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	<b>VP</b>	
STREET ADDRESS			STREET ADDRESS	<b>Dominick Sorrentino</b>	
CITY-ST-ZIP			CITY-ST-ZIP	<b>581705 White Oak Rd</b>	
			<b>Yulee, FL 32097</b>		
12. I hereby certify that the information supplied with this filing does not qualify 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 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.					
<b>SIGNATURE:</b> 			<b>01/31/05</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
			<b>904-548-1050</b>		
			Daytime Phone #		

**50012196**



01172005 Chg-P CR2E034 (10/03)