


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 10, 2005 8:00 am**  
**Secretary of State**

01-10-2005 90021 013 \*\*\*150.00

<b>DOCUMENT # F01000006077</b>		
1. Entity Name W.W. WOOD PRODUCTS, INC.		

Principal Place of Business 10182 OLD HIGHWAY 60 DUDLEY, MO 63936	Mailing Address P.O. BOX 50 DUDLEY, MO 63936
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**50001231**



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01042005 Chg-P CR2E034 (10/03)

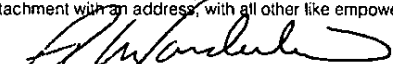
6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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	DATE
(NOTE: Registered Agent signature required when reinstating)	

<b>FILE NOW!!! FEE IS \$150.00</b> <b>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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PCD WUNDERLICH, RONALD E <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10182 OLD HIGHWAY 60	NAME	
STREET ADDRESS	DUDLEY, MO 63936	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	V WUNDERLICH, MARK D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10182 OLD HIGHWAY 60	NAME	
STREET ADDRESS	DUDLEY, MO 63936	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	STD WUNDERLICH, LINDA <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10182 OLD HIGHWAY 60	NAME	
STREET ADDRESS	DUDLEY, MO 63936	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	VD PACK, TRECENDA J <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10182 OLD HIGHWAY 60	NAME	VD Wunderlich Trecenda J
STREET ADDRESS	DUDLEY, MO 63936	STREET ADDRESS	10182 Old Hwy 60
CITY-ST-ZIP		CITY-ST-ZIP	Dudley, MO 63936
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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.	
SIGNATURE: 	15-05- 573 624-7090 Date Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	