

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000948

FILED
Feb 27, 2006
Secretary of State

Entity Name: AMERICAN FOREST MANAGEMENT, INC.

Current Principal Place of Business:

407 NORTH PIKE EAST
SUMTER, SC 29150

New Principal Place of Business:

Current Mailing Address:

407 NORTH PIKE EAST
SUMTER, SC 29150

New Mailing Address:

FEI Number: 57-0682169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHIS, CHARLES R JR.
2891 HIGHWAY 90 WEST
BONIFAY, FL 32425 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: VD () Delete
Name: BELSER, ROY E
Address: 6 EDWARDS DRIVE
City-St-Zip: SUMMERTON, SC 29148

Title: D () Delete
Name: FOX, J. CARTER
Address: PO BOX 445
City-St-Zip: BURGESS, VA 224320445

Title: D () Delete
Name: CALDER, MICHAEL W
Address: 5826 NW 27TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653

Title: VD () Delete
Name: JOLLEY, ROBERT M JR.
Address: 11104 DUCK POND COURT
City-St-Zip: CHARLOTTE, NC 28277

Title: VD () Delete
Name: KLAPTHOR, PAUL E
Address: 2800 WINDMILL DR
City-St-Zip: SUMTER, SC 29150

Title: D () Delete
Name: ALMOND, JACOB F
Address: 340 SPEARS RAOD
City-St-Zip: KINGSTON, TN 37763

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
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Address:
City-St-Zip:

Title: () Change () Addition
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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 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: DAVID PRITCHARD

PRES

02/27/2006

Electronic Signature of Signing Officer or Director

Date