

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004802

FILED
Mar 25, 2009
Secretary of State

Entity Name: TIMBER PRODUCTS ENGINEERING, INC.

Current Principal Place of Business:

1641 SIGMAN ROAD
CONYERS, GA 30012

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 185
CONYERS, GA 30012

New Mailing Address:

FEI Number: 58-1763635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, WILLIAM MARK
124 PINETREE ROAD
PERRY, FL 32347 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: PD () Delete
Name: WILLIAMS, RONALD L
Address: 1641 SIGMAN ROAD
City-St-Zip: CONYERS, GA 30012 US

Title: V () Delete
Name: EDWARDS, PATRICK C
Address: 8735 CARRINGTON LAKES RIDGE
City-St-Zip: TRUSSVILLE, AL 35173 US

Title: SD () Delete
Name: RESPESS, JAMES L III
Address: 1641 SIGMAN ROAD
City-St-Zip: CONYERS, GA 30012 US

Title: T () Delete
Name: THOMSON, TERESA J
Address: 1641 SIGMAN ROAD
City-St-Zip: CONYERS, GA 30012 US

Title: D () Delete
Name: GREER, TODD P
Address: 1641 SIGMAN ROAD
City-St-Zip: CONYERS, GA 30012 US

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: TODD P GREER

D

03/25/2009

Electronic Signature of Signing Officer or Director

_____ Date