

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000773

FILED
Feb 07, 2009
Secretary of State

Entity Name: DRENNEN FORESTRY SERVICES, INC

Current Principal Place of Business:

115 B 4TH ST SE
CULLMAN, AL 35055

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1029
CULLMAN, AL 35056

New Mailing Address:

FEI Number: 63-0837069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR.
SUITE 4
WESTON, FL 33331 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: P () Delete
Name: ELLISON, GEOFFREY P
Address: 801 5TH AVE SE
City-St-Zip: CULLMAN, AL 35055

Title: V () Delete
Name: DANIEL, DANNY
Address: 501 FIELDSTONE RD.
City-St-Zip: HELENA, AL 35080

Title: S () Delete
Name: ELLISON, JANE
Address: 801 5TH AVE. S.E.
City-St-Zip: CULLMAN, AZ 35055

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: S () Change (X) Addition
Name: ELLISON, ANDREW R
Address: 801 5TH AVE SE
City-St-Zip: CULLMAN, AL 35055 US

Title: S () Change (X) Addition
Name: ELLISON, JULIE H
Address: 801 5TH AVE SE
City-St-Zip: CULLMAN, AL 35055 US

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: JANE R ELLISON

MS

02/07/2009

Electronic Signature of Signing Officer or Director

Date