2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2011
Secretary of State

DOCUMENT# F09000004603

Entity Name: THE MANUAL WOODWORKERS AND WEAVERS, INC.

Current Principal Place of Business:

3737 HOWARD GAP RD
HENDERSONVILLE, NC 28792

New Principal Place of Business:

Current Mailing Address:

3737 HOWARD GAP RD
HENDERSONVILLE, NC 28792

New Mailing Address:

FEI Number: 56-1192222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MYERS, JERRY
4688 MANDERLY DR
WELLINGTON, FL 33449 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

OFFICERS AND DIRECTORS:

Title: CP
Name: OATES, TRAVIS L
Address: 3737 HOWARD GAP RD
City-St-Zip: HENDERSONVILLE, NC 28792

Title: CP
Name: SHERRILL, MOLLY O
Address: 3737 HOWARD GAP RD
City-St-Zip: HENDERSONVILLE, NC 28792

Title: D
Name: OATES, C. LEMUEL
Address: 3737 HOWARD GAP RD
City-St-Zip: HENDERSONVILLE, NC 28792

Title: D
Name: OATES, SANDRA T
Address: 3737 HOWARD GAP RD
City-St-Zip: HENDERSONVILLE, NC 28792

Title: ST
Name: CLARKE, JAMES G
Address: 621 GEORGETOWN DR NW
City-St-Zip: CONCORD, NC 28027

I hereby 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 all other like empowered.

SIGNATURE: JAMES G. CLARKE ST 01/03/2011

Electronic Signature of Signing Officer or Director Date