

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21615

FILED
Apr 24, 2006
Secretary of State

Entity Name: SOUTHEAST TIMBER BRIDGE COMPANY, INC.

Current Principal Place of Business:

2060D NE OCEAN BLVD
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

5945 WEST MAIN
SUITE 205
KALAMAZOO, MI 49009 US

New Mailing Address:

FEI Number: 38-2399357 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, WILLIAM J
217 S ADAMS ST
TALLAHASSEE, FL 32301 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: D () Delete
Name: KRENN, SANDRA,
Address: 5945 WEST MAIN SUITE 205
City-St-Zip: KALAMAZOO, MI 49009

Title: STD () Delete
Name: PUCKETT, TAMRA
Address: 5945 WEST MAIN SUITE 205
City-St-Zip: KALAMAZOO, MI 49009

Title: PD () Delete
Name: KRENN, ERVIN A,
Address: 5945 WEST MAIN SUITE 205
City-St-Zip: KALAMAZOO, MI 49009

Title: D () Delete
Name: KRENN, ROBERT
Address: 5945 WEST MAIN SUITE 205
City-St-Zip: KALAMAZOO, MI 49009

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:

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: SANDRA KRENN

D

04/24/2006

Electronic Signature of Signing Officer or Director

_____ Date