

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F28294

FILED
Apr 24, 2006
Secretary of State

Entity Name: W.W. LUMBER OF PALM BEACH, INC.

Current Principal Place of Business:

16500 SW WARFIELD BLVD
PO BOX 1
INDIANTOWN, FL 34956 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1
INDIANTOWN, FL 34956

New Mailing Address:

FEI Number: 59-2085743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALL, IRIS
16500 SW PALOMINO STREET
INDIANTOWN, FL 34956 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: WALL, IRIS PRES
Address: 16500 SW PALOMINO ST
City-St-Zip: INDIANTOWN, FL 34956 US

Title: S () Delete
Name: LAWRENCE, CAROLYN W SEC
Address: 16200 SW MAPLE AVE
City-St-Zip: INDIANTOWN, FL 34956

Title: T () Delete
Name: WALL, IRIS TREAS
Address: 16500 SW PALOMINO ST
City-St-Zip: INDIANTOWN, FL 34956 US

Title: VP () Delete
Name: GILLIAM, ALLEN R VP
Address: 15950 SW PALOMINO ST
City-St-Zip: INDIANTOWN, FL 34956

Title: VP () Delete
Name: EDWARDS, CRAIG VP
Address: 15801 SW PALOMINO STREET
City-St-Zip: INDIANTOWN, FL 34956

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 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: CAROLYN W LAWRENCE

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04/24/2006

Electronic Signature of Signing Officer or Director

Date