2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007
Secretary of State

DOCUMENT# F28294

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:

16500 SW WARFIELD BLVD
BOX 1
INDIANTOWN, FL 34956 US

Current Mailing Address:

P.O. BOX 1
INDIANTOWN, FL 34956

New Mailing Address:

P.O. BOX 1
INDIANTOWN, FL 34956 US

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 SEC 03/27/2007

Electronic Signature of Signing Officer or Director — Date