2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 05, 2007 08:00 AM Secretary of State

	DOC	JM	ENT	「#F	89051
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1. Entity Name

AMERICAN WOOD FRAME, INC.



Principal Place of Business

Mailing Address

15630 MCGREGOR BLVD 102 15630 MCGREGOR BLVD

102

FORT MYERS, FL 33908

FORT MYERS, FL 33908



DO NOT WRITE IN THIS SPACE

02282007 No Chg-P

CR2E034 (11/05)

FEI Number
59-2232479

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEPLOWSKI, WALTER J 15630 MCGREGOR BLVD. #102 FORT MYERS, FL 33908

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8.	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.	I am familiar with, and accept
	the obligations of registered agent.	·

SIGNATURE

Signature typed or printed name of registered agent and little if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

W00000655715 03/13/07-80117-023 150.00

10. OFFICERS AND DIRECTORS IIITE PD PEPLOWSKI, WALTER J NAME 15630 MCGREGOR BLVD. #102 STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33908 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 appropried to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an actives, with all other like empowered.

SIGNATURE:

CITY-SI-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER S. PEPLUWSKI 2/27/20