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Apr 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000000805 (1)

1. Corporation Name

WOODCRAFT SUPPLY CORP.

Principal Place of Business

P.O. BOX 1646
PARKERSBURG WV 26102

Mailing Address

P.O. BOX 1646
PARKERSBURG WV 26102-1646



3. Date Incorporated or Qualified

02/17/1994

3a. Date of Last Report

03/26/1996

4. FEI Number

55-0643907

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME KATCHUR, BRYAN J
STREET ADDRESS 5300 BRISCOE RD.
CITY-ST-ZIP PARKERSBURG WV

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VPD
NAME ROSS, SAMUEL B II
STREET ADDRESS 5300 BRISCOE RD.
CITY-ST-ZIP PARKERSBURG WV

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE S
NAME SMITH, DONNA M
STREET ADDRESS 5300 BRISCOE RD.
CITY-ST-ZIP PARKERSBURG WV 26101

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE T
NAME GERRARD, LARRY J
STREET ADDRESS 5300 BRISCOE RD.
CITY-ST-ZIP PARKERSBURG WV 26101

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME SUTTON, JAMES
STREET ADDRESS 6402 SOUTH TROY CIRCLE
CITY-ST-ZIP ENGLEWOOD CO

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D
NAME ROSS, S. BYRL
STREET ADDRESS 5300 BRISCOE ROAD
CITY-ST-ZIP PARKERSBURG WV

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/97

(304) 428-8261

CR2E034 (9/96)

SBR
BOARD OF DIRECTORS

1. **Sam Ross**
4600 River Road
Vienna, WV 26105
2. **Susan Ross**
4600 River Road
Vienna, WV 26105
3. **Bob Rector**
61 Oakwood Estates
Parkersburg, WV 26101
4. **Jim Sutton**
6402 South Troy Circle
Englewood, CO 80111-6424
5. **Jan Monroe**
6402 South Troy Circle
Englewood, CO 80111-6424
6. **William Hamb**
1420 Sweetbrier Rd.
Charleston, WV 25314
7. **John Staley IV**
537 Glen Arden Dr.
Pittsburgh, PA 15208
8. **George Broughton**
210 N. 7th Street
Marietta, OH 45750
9. **Leonard Harvey**
~~P.O. Box 5516~~ 402 51st Street
Vienna, WV 26105