

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000003859

FILED  
Mar 12, 2007  
Secretary of State

Entity Name: WOOD CARVERS SUPPLY, INC.

## Current Principal Place of Business:

P.O. BOX 7500  
ENGLEWOOD, FL 34295

## New Principal Place of Business:

2870 WORTH AVE  
ENGLEWOOD, FL 34295

## Current Mailing Address:

P.O. BOX 7500  
ENGLEWOOD, FL 34295

## New Mailing Address:

PO BOX 7500  
ENGLEWOOD, FL 34295

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EFFREM, DEBORAH  
3031 PLACIDA RD. # 9  
ENGLEWOOD, FL 34295 US

## Name and Address of New Registered Agent:

EFFREM, DEBORAH  
2870 WORTH AVE  
ENGLEWOOD, FL 34224 US

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: DEBORAH EFFREM, VP

03/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: EFFREM, TIMOTHY  
Address: 3031 PLACIDA RD # 9  
City-St-Zip: ENGLEWOOD, FL 34224

Title: VP ( ) Delete  
Name: EFFREM, DEBORAH  
Address: 3031 PLACIDA RD # 9  
City-St-Zip: ENGLEWOOD, FL 34224

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: EFFREM, TIMOTHY  
Address: 2870 WORTH AVE  
City-St-Zip: ENGLEWOOD, FL 34224

Title: VP (X) Change ( ) Addition  
Name: EFFREM, DEBORAH  
Address: 2870 WORTH AVE  
City-St-Zip: ENGLEWOOD, FL 34224

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: TIMOTHY EFFREM, PRES

P

03/12/2007

Electronic Signature of Signing Officer or Director

Date