




2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 20, 2005 8:00 am
Secretary of State

05-02-2005 90481 042 ***150.00

DOCUMENT # F95000000599					
1. Entity Name MATSON LUMBER COMPANY					
Principal Place of Business 24 DOCKSIDE LANE PMB 489 KEY LARGO, FL 33037-5273			Mailing Address C/O SCHNEIDER DOWNS & CO. INC 1133 PENN AVE. PITTSBURGH, PA 15222-4205		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 25-1431028	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent MATSON, ROBERT D 24 DOCKSIDE LANE PMB 489 KEY LARGO, FL 33037-5273				7. Name and Address of New Registered Agent Name Matson, Joan Street Address (P.O. Box Number is Not Acceptable) 24 Dockside Lane PMB 489 City Key Largo FL Zip Code 33037-5273	
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  JOAN MATSON DATE 6/14/05 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD MATSON, ROBERT D PMB 489, 24 DOCKSIDE LANE KEY LARGO, FL 330375273 <input checked="" type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MATSON, BECKY JO 132 MAIN ST. BROOKVILLE, PA 15825 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Matson, Joan PMB 489, 24 Dockside Lane Key Largo, FL 33037-5273 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST DOMENICK, LEONARD 132 MAIN ST. BROOKVILLE, PA 15825 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD CONTI, BARBARA A 132 MAIN ST BROOKVILLE, PA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MATSON, JOHN 132 MAIN ST. BROOKVILLE, PA 15825 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MATSON, JIM 132 MAIN ST BROOKVILLE, PA 15825 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Matson, Jim 132 Main Street Brookville, PA 15825 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I 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 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  L.L. DOMENICK		DATE: 4/29/05 DAYTIME PHONE: 814 849-3354			

66023337



04262005 Chg-P CR2E034 (10/03)



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ATTACHMENT

66023337

#F95000000599

May 31, 2005

Florida Department of Revenue
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Re: Matson Lumber Company
EIN: 25-1431023
Year: December 31, 2005

On behalf of the above-named taxpayer we are responding to your notice dated May 17, 2005 (copy enclosed). Your notice indicates that the return has not been filed because the new registered agent did not sign the return accepting the designation.

Enclosed please find a copy of the return as originally filed with Joan Matson's signature in Box 8.

We respectfully request the abatement of all tax and penalties on this account and the notification be sent to the taxpayer accordingly.

If you have any questions or require additional information, please do not hesitate to contact Jeffrey A. Wlahofsky or George E. Adams of our office.

Very truly yours,

Certified Public Accountants

JCK/mab
Ref: 15486-31000
Enclosures
c: Mr. Len Domenick
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Schneider Downs & Co., Inc.
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