2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001181

Entity Name: SUPERIOR PINE PRODUCTS COMPANY

FILED Jan 24, 2005 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
U.S. 441 NO FARGO, GA	ORTH, P.O. BO A 31631	OX 278			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
U.S. 441 NO FARGO, GA	ORTH, P.O. BO A 31631	OX 278			
FEI Number:	58-0452920	FEI Number Applied For ()	FEI Number Not Applicable (Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
RUFF, FRANK H 101 N. RANGE STREET (P.O. DRAWER 570) MADISON, FL 323410570 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.					
SIGNATUR		c Signature of Registered Agent	•	 Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR					
Title: Name: Address: City-St-Zip:	P () OETTMEIER, W 101 5TH AVE FARGO, GA 310		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V () RHAME, JOAN 501 MINE HILL I FAIRFIELD, CT		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	LAWRENCE, W 333 BRIDGE ST	Delete J III . NW (BRIDGEWATER PLACE) ;, MI 495010352	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	T () FENDIG, JAMES 15 HASLEITER'S SAVANNAH, GA	S RETREAT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C () LAWRENCE, JC 1800 S. 35TH S' GALESBURG, M	TREET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () KNIGHT, JAMES 967 CAMPBELL NORTH AUGUST	TON DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: W M OETTMEIER JR P 01/24/2005