FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **F95000004030 (1)**

1. Corporation Name

AMERICAN CEMWOOD CORPORATION

Principal Place of Business	Mailing Address
3615 PACIFIC BLVD SW ALBANY OR 97321	3615 PACIFIC BLVD SW ALBANY OR 97321

3. Date Incorporated or Qualified: 08/21/1995
3a. Date of Last Report:
4. FEI Number: 93-0933786 (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 5895 Windward Parkway
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Suite 200
City & State 23	City & State 28 Alpharetta, GA.
Zip 24 / Country 25	Zip 29 30202 / Country 30 USA

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 name changed) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	WORTHY, VICTOR R		1.2 NAME	
STREET ADDRESS	925 W GEORGIA ST VANCOUVER, BRITISH COLU		1.3 STREET ADDRESS	
CITY-ST-ZIP	CANADA V6C 3L2		1.4 CITY-ST-ZIP	
TITLE	DP	☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	KIRKBRIDE, BRAD D		2.2 NAME	
STREET ADDRESS	3615 PACIFIC BLVD SW	Do not delete AMS	2.3 STREET ADDRESS	
CITY-ST-ZIP	ALBANY OR 97321		2.4 CITY-ST-ZIP	
TITLE	DT	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	SORENG, AL R		3.2 NAME	
STREET ADDRESS	3615 PACIFIC BLVD SW		3.3 STREET ADDRESS	
CITY-ST-ZIP	ALBANY OR 97321		3.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	FERGUSON, GLENN M		4.2 NAME	
STREET ADDRESS	925 W GEORGIA ST, VANCOVER, BRITISH COLUMB		4.3 STREET ADDRESS	
CITY-ST-ZIP	CANADA V6C 3L2		4.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MACFARLANE, R. GARTH		5.2 NAME	
STREET ADDRESS	925 W GEORGIA ST, VANCOVER, BRITISH COLUMB		5.3 STREET ADDRESS	
CITY-ST-ZIP	CANADA V6C 3L2		5.4 CITY-ST-ZIP	
TITLE	S	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	MYNETT, G. E.		6.2 NAME	
STREET ADDRESS	925 W GEORGIA ST, VANCOVER, BRITISH COLUMB		6.3 STREET ADDRESS	
CITY-ST-ZIP	CANADA V6C 3L2		6.4 CITY-ST-ZIP	

100001765731
-04/02/96--01012--024
***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Richard E. Jones A.B. Soreng
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)