

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G14816

FILED  
Apr 25, 2007  
Secretary of State

Entity Name: CONSOLIDATED FOREST PRODUCTS, INC.

## Current Principal Place of Business:

375 COMMERCE WAY, SUITE 101  
P O BOX 520090  
LONGWOOD, FL 32750 US

## New Principal Place of Business:

375 COMMERCE WAY, SUITE 101  
LONGWOOD, FL 32750 US

## Current Mailing Address:

375 COMMERCE WAY, SUITE 101  
P O BOX 520090  
LONGWOOD, FL 327520090 US

## New Mailing Address:

P. O. BOX 520090  
LONGWOOD, FL 327520090 US

FEI Number: 59-2253086

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ST. LAURENT, WILLIAM  
375 COMMERCE WAY  
SUITE 101  
LONGWOOD, FL 32750 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ST. LAURENT, WILLIAM  
Address: 375 COMMERCE WAY STE 101  
City-St-Zip: LONGWOOD, FL 32750

Title: S ( ) Delete  
Name: ST. LAURENT, WENDY  
Address: 375 COMMERCE WAY, STE 101  
City-St-Zip: LONGWOOD, FL 32750

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM ST. LAURENT

P

04/25/2007

Electronic Signature of Signing Officer or Director

Date