

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **H89323** (0)  
 1. Corporation Name  
**BIRCHWOOD SALES INC.**



Principal Place of Business: **% RONALD MARCHESSAULT, 347 N BIRCH RD, FT LAUDERDALE FL 33304-4241, US**  
 Mailing Address: **105 LAKE EMERALD DR #316, FT LAUDERDALE FL 33309, US**

3. Date Incorporated or Qualified: **12/11/1985**  
 3a. Date of Last Report: **03/21/1995**  
 4. FEI Number: **59-2624184**  
 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: 21. State, Apt. #, etc.; 22. City & State; 23. Zip; 24. Country; 25. Country  
 2a. Mailing Address: 26. State, Apt. #, etc.; 27. City & State; 28. Zip; 29. Country; 30. Country

**9. Name and Address of Current Registered Agent**

**MARCHESSAULT, RONALD  
 347 NORTH BIRCH ROAD  
 FT. LAUDERDALE FL 33304**

**10. Name and Address of New Registered Agent**

81 Name; 82 Street Address (P.O. Box Number is Not Acceptable); 83; 84 City; 85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

12.1 NAME: <b>DP MARCHESSAULT RONALD</b>	<input type="checkbox"/> DELETE
12.2 STREET ADDRESS: <b>347 N BIRCH RD FT. LAUDERDALE FL VSD</b>	
12.3 CITY, ST, ZIP: <b>MARCHESSAULT, MICHELINE 347 N BIRCH RD FT. LAUDERDALE FL</b>	<input type="checkbox"/> DELETE
12.4 NAME:	
12.5 STREET ADDRESS:	
12.6 CITY, ST, ZIP:	<input type="checkbox"/> DELETE
12.7 NAME:	
12.8 STREET ADDRESS:	
12.9 CITY, ST, ZIP:	<input type="checkbox"/> DELETE
12.10 NAME:	
12.11 STREET ADDRESS:	
12.12 CITY, ST, ZIP:	<input type="checkbox"/> DELETE

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

13.1 NAME:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 STREET ADDRESS:	
13.3 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.4 NAME:	
13.5 STREET ADDRESS:	
13.6 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.7 NAME:	
13.8 STREET ADDRESS:	
13.9 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME:	
13.11 STREET ADDRESS:	
13.12 CITY, ST, ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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)(k), 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 attached board with an address.

SIGNATURE: *Ronald Marchessault*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**RONALD MARCHESSAULT**

1-17-96 7651342  
 DATE ORIGINAL FILING

CR2E034 (12/95)