

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H92448

FILED
Jan 20, 2009
Secretary of State

Entity Name: PREMIER WOODWORK, INC.

Current Principal Place of Business:

8254 BAMA LANE
BUILDING #2, UNIT #1
WEST PALM BEACH, FL 33411

New Principal Place of Business:

8254 BAMA LANE
BUILDING #2, UNIT #15
WEST PALM BEACH, FL 33411

Current Mailing Address:

8254 BAMA LANE
BUILDING #2, UNIT #1
WEST PALM BEACH, FL 33411

New Mailing Address:

8254 BAMA LANE
BUILDING #2, UNIT #15
WEST PALM BEACH, FL 33411

FEI Number: 59-2613294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFE, THOMAS
8254 BAMA LANE
WEST PALM BEACH, FL 33411 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: VPDP () Delete
Name: WOLFE, TOM,
Address: 13244 BRYAN ROAD
City-St-Zip: LOXAHATCHEE, FL

Title: ST () Delete
Name: WOLFE, TOM
Address: 13244 BRYAN ROAD
City-St-Zip: LOXAHATCHEE, FL

Title: S () Delete
Name: MCKINNEY, STEPHEN K
Address: 17183 77TH LANE N
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: THOMAS WOLFE

VPDP

01/20/2009

Electronic Signature of Signing Officer or Director

_____ Date