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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # COMBINED WOODWORKING, INC.

FILED May 08 1998 8:00am Secretary of State



## Principal Place of Business Ze. Mailing Address Substitutes Sub		·				{ 109/01/10 31/ 08/11 00/14 01/16 10/10 1/11 0/8/1 0/	JUL HOLD HOLD AND	(
NAVARRE FL 32988 Substitute	Principal Plac	ce of Business	Mailing Address					
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Suite, ApJ. #, etc. 27	2. Principal F	Place of Business	2a. Mailing Address				Ar	oplied For
City & State Shame and Address of Current Registered Agent Shame and Address of Current Registered Agent FITTIMAN, MARKINE Shame and Address of Current Registered Agent Shame and Addr	21	26				59-2858826	Not Applicable	
20	Suite, Apt. #, etc. Suite, Apt. #, etc					6 Cartificate of Status Desired	•	
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Second S		te	City & State			Election Campaign Financing	\$5.00	May Be
Personal Property Tax due June 20	23					Trust Fund Contribution	Added	to Fees
PITTMAN, MARYNE E. 81 Name and Address of New Registered Agent 91 Name and Address of New Registered Agent 92 Name and Address of New Registered Agent 93 Name 92 Street Address (P.O. Box Number is Not Acceptable) 93 94 Oily F.L. 85 Zip Code 94 Oily F.L. 95 Zip Code 94 Oily 94 Zip Code 94		Country	Zφ	Coun	try	8. This corporation owes or has paid the o		_ ~
PITTMAN, MARVIN E. 3850 BOB TOLBERT RD NAVARRE FL 32569 102 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607-0502 and 607-1508, Florida Statutes, the 40 Gry FL BS Zip Code 11. Pursuant to the provisions of Sections 607-0502 and 607-1508, Florida Statutes, the 40 Gry FL BS Zip Code 11. Pursuant to the provisions of Sections 607-0502 and 607-1508, Florida Statutes, the 40 Gry FL BS Zip Code 11. Pursuant to the provisions of Sections 607-0502 and 607-1508, Florida Statutes, the 40 Gry FL BS Zip Code 11. Pursuant to the provisions of Sections 607-0502 and 607-1508, Florida Statutes, the 40 Gry FL BS Zip Code 12. Of II CR BS AND DIRECTORS 1 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. Of II CR BS AND DIRECTORS 1 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. Of II CR BS AND DIRECTORS 1 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CIT ST. 2P ZIP ZIP ZIP ZIP ZIP ZIP ZIP ZIP ZIP ZI	24	25	29	30				No
3850 BOB TOLBERT RD NAVARRE FL 32568 82 Street Address (F.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607 0502 and 607,1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its register officio or registered agent, or both in the State of Tronds, Such change was authorized by the corporation's submits this statement for the purpose of changing its registerer agent in a familiar with, and accept the obligations of, Sections 607 0505, Florids Statutes. SIGNATURE SIGNATURE SIGNATURE OF I CLES AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. TARRES AND ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. TARRES AND ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. I STREET ADDRESS 10. STREET ADDRESS			nt Registered Agent			10. Name and Address of New Registers	d Agent	
NAVÄRRE FL 32568 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 registere office or registered agont, 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 agont and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature byte of printed remark of registered floridary in the first of aquatation. CIRCTE Registered Agent agritude register remarks CIRCTE Registered Agent agritude register remarks Directors 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIRLE DIRECTORS 12. DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIRLE DIRECTORS D	PI	ITMAN, MARVIN E.		1	11 Name			
NAVARRE FL 32568 18. City	36	50 Bob Tolbert RD		-	Street Add	Iracs (P.O. Boy Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607 Office evir 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of 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 transmitter with, and accept the obligations of, Section 607 0505, Florida Statutos. SIGNATURE SIGNATURE 12. TO OFFI Registered Agent agent agent with the Carelinative Control of Statutos. SIGNATURE 13. TO OFFI Registered Agent age	N/A	VARRE FL 32566			Stiedt Add	iless (F.O. DOX NUMBER IS NOT Acceptable)		
Pursuant to the provisions of Sections 607 050P and 697 150B, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Sections 607 050S, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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, or both, in the State of Florida Statutes. I he above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Portion State of Port	· -	-		Įε	13			
11. Pursuent to the provisions of Sections 607 050P and 697 150B. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its register agent 1 am familiar with, and accept the obligations of, Socion 607 050S, florids Statutes, agent 1 am familiar with, and accept the obligations of, Socion 607 050S, florids Statutes, agent 1 am familiar with, and accept the obligations of, Socion 607 050S, florids Statutes, agent 1 am familiar with, and accept the obligations of, Socion 607 050S, florids Statutes, agent 1 am familiar with, and accept the obligations of, Socion 607 050S, florids Statutes, the obligations of, Socion 607 050S, florids Statutes, agent 1 am familiar with, and accept the obligations of, Socion 607 050S, florids Statutes, the obligations of the obligations's board of directors. I hereby accept the appointment as registers obligation's board of directors. I hereby accept the appointment as registers obligation's board of directors. I hereby accept the appointment as registers of the obligation's board of directors. I hereby accept the appointment as registers of the obligation of the oblig				-				
19. Pursuent to the processors of Sections 607 0505 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered again, or both in the State of Florida, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered again, 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 again. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE				18	34 City	S	85 Zip	Code
office or registered agent, or both, in the State of Florida. Such clange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. SIGNATURE 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PU DELETE 11 THE MORES CITY-ST-ZIP TITLE WORKER STEVE T. TS33 BLACKJACK CR. 13 SIRRET ADDRESS CITY-ST-ZIP TITLE VD DELETE 21 THE DORESS CITY-ST-ZIP TITLE VD DELETE 21 THE DORESS CITY-ST-ZIP TITLE WOORE, SECKY 32 NAME STREET ADDRESS CITY-ST-ZIP TITLE WOORE, SECKY 34 STREET ADDRESS CITY-ST-ZIP TITLE WOORE, SECKY 35 STREET ADDRESS CITY-ST-ZIP	44 Purpupit	to the provisions of Soctions 607.05	02 and 607 1508 Florida Statu	ites the aby	ove-named cor			te registered
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12.	SIGNATURE							
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14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the information	14. hereby	certify that the information supplied	with this filing does not qualify	for the exer	nption 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	indicated officer or	on inis annual report or supplement of the re-	tar annual report is true and at coiver or trustee empowered to	curate and execute th	inai my signati is report as rec	ure snar have the same legal effect as it made puired by Chapter 607, Florida Statutes: and the	at my name ar	pears in