## 2004 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # K10955** 1. Entity Name M & L TIMBER, INC.

## FILED Apr 21, 2004 8:00 am Secretary of State 04-21-2004 90015 046 \*\*\*150.00

			THE THE			
11646 HWY 11 11		Mailing Address 11646 HWY 11 BUNNELL, FL 32110			54037633	
				%A-,51	1666666F&	
-	NO NOT WRITE	IN THIS SE	VOE	04112004 No Chg-P	CR2E034 (10/03)	
DO NOT WRITE IN THIS SPA			<b>NUE</b>	4. FEI Number 59-2847713	Applied For Not Applicable	
				5. Certificate of Status Desire	d Sa.75 Additional Fee Required	
	6. Name and Address of Current Reg	sistered Agent	-			
HENRY, MITCHEL 11646 HWY 11				DO NOT WRITE		
BUNNELL, FL 32110				IN THIS SPACE		
	e named entity submits this statement for th	e purpose of changing its regist	tered office or registe	ered agent, or both, in the State of	Florida. I am familiar with, and accept	
nie obligat	tions of registered agent.					
SIGNATURE_	Signature, typed or printed name of registered agent and t	itle it applicable. (NOTE: Regist	tered. Agent signature require	ici when reinstating)	DATE	
		T				
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Fit     Trust Fund Contribution		6.00 May Be ded to Fees		
10.	OFFICERS AND DIF	RECTORS				
TITLE	PVST					
NAME STREET ADDRESS	HENRY, M. MITCHEL RT1, BOX-228 11646 HWY 11 BUNNELL, FL 32110					
CITY-ST-ZIP						
TITLE	32110					
NAME						
STREET ADDRESS	{					
CITY-ST-ZIP						
TITLE						
NAME						
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CITY-ST-ZIP	<b>.</b>	**	-			
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indicated	certify that the information supplied with this don this report or supplemental report is tru reporation or the receiver or trustee empower	s filing does not qualify for the e ie and accurate and that my sig ered to execute this report as re-	exemption stated in S mature shall have the puired by Chapter 60	ection 119.07(3)(i), Florida Statuti same legal effect as if made und p. Florida Statutes: and that my n	es. I further certify that the information fer oath; that I am an officer or director name appears in Block 10 or Block 11 if	

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: M. Milchel Glency		4/12/04 386-43n
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR	Date I	Daytime Phone #

0895