## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L0000007810

Entity Name: TROPICAL LUMBER AND PLYWOOD, LLC

Apr 26, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

4500 110TH AVE. N. CLEARWATER, FL 33762

**Current Mailing Address: New Mailing Address:** 

1103 FLORIDA AVE., SUITE #4 PALM HARBOR, FL 34683 34650 US HWY 19 N

SUITE 108 PALM HARBOR, FL 34684

FEI Number: 59-3655933 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JENKINS, ROSE M JENKINS, ROSE M 1103 FLORIDA AVE., SUITE 4 PALM HARBOR, FL 34683 34650 US HWY 19 N SUITE 108

PALM HARBOR, FL 34684 US

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: 04/26/2005

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MEMBERS:

() Delete

HAWTHORNE INDUSTRIAL, PRODUCTS, INC.

Address: 9674 KILGORE ROAD City-St-Zip: ORLANDO, FL 32836

Title: MGR () Delete

Name: QUALITY INVESTMENT,, LLC Address: 4500 110TH AVE. N. City-St-Zip: CLEARWATER, FL 33762

Title: MGR () Delete AMERICAN FIFTIES, IN, C. Name: 1103 FLORIDA AVE., STE. 4 Address: City-St-Zip: PALM HARBOR, FL 34683

Title: () Delete

Name: Address: City-St-Zip:

Name:

ADDITIONS/CHANGES:

Title: (X) Change ( ) Addition

HAWTHORNE INDUSTRIAL, PRODUCTS, INC. Name:

Address: 9674 KILGORE ROAD City-St-Zip: ORLANDO, FL 32836

Title: MGRM (X) Change ( ) Addition Name: QUALITY INVESTMENT,, LLC Address: 4500 110TH AVE. N. City-St-Zip: CLEARWATER, FL 33762

Title: MGRM (X) Change ( ) Addition AMERICAN FIFTIES, IN, C. Name: 3465 US HWY 19 N, STE. 108 Address: City-St-Zip: PALM HARBOR, FL 34684

Title: MGR ( ) Change (X) Addition

Name: HENRI, BALESTRIERI 34650 US HWY 19 N, STE. 108 Address: City-St-Zip: PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: HENRI BALESTRIERI 04/26/2005