

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000122718

Entity Name: M & G WOOD, LLC

FILED  
Apr 02, 2008  
Secretary of State

**Current Principal Place of Business:**

3900 E. NEW YORK AVENUE  
DELAND, FL 32724 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1510  
DELAND, FL 32721 US

**New Mailing Address:**

FEI Number: 26-1524588

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRIEBIS, DANIEL S  
3890 TURTLE CREEK DRIVE  
SUITE B  
PORT ORANGE, FL 32127 US

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

GOGEL, WILLIAM A  
2609 SPRUCECREEK BLVD.  
SUITE B  
PORT ORANGE, FL 32128 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: WILLIAM A. GOGEL

04/02/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GOGEL, WILLIAM A  
Address: 2609 SPRUCE CREEK BOULEVARD  
City-St-Zip: PORT ORANGE, FL 32128 US

Title: MGRM ( ) Delete  
Name: MURRAY, CHARLES E  
Address: 2230 KNOWLES ROAD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

**ADDITIONS/CHANGES:**

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 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: WILLIAM A. GOGEL

MGRM

04/02/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date