


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2006 08:00 AM
Secretary of State

DOCUMENT # L19759 1. Entity Name BUCKHORN TIMBER & RESOURCE CORP.	
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Principal Place of Business 777 S PARK AVE. APOPKA, FL 32703	Mailing Address C/O MIKE GRANDEY P O BOX 670 APOPKA, FL 32704
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DO NOT WRITE IN THIS SPACE

07052006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3024923	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GRANDEY, MIKE 777 SOUTH PARK AVENUE APOPKA, FL 32703	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHIGHAM, PHILLIP OWEN 2060 KELLY PARK RD APOPKA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNN, ROBERT KIM 3620 TAYSIDE CT. APOPKA, FL 32712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPOON, D. WAYNE 804 E. PEARL ST APOPKA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRISON, RICHARD ALAN 2219 WEKIVA VILLAGE LANE APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANDEY, MIKE 777 S PARK AVE APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

00000508347
 07/07/06-80005-004 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  1-5-06 407-889-4147

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #