

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L43841

Entity Name: AL'S WOOD ART, INC.

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

P O BOX 131
ISTACHATTA, FL 34636 US

New Principal Place of Business:

13330 S. ISTACHATTA RD
FLORAL CITY, FL 34436 US

Current Mailing Address:

P O BOX 131
ISTACHATTA, FL 34636 US

New Mailing Address:

FEI Number: 59-2991269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STANGER, LORI
13330 S ISTACHATTA RD
FLORAL CITY, FL 34436 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: STANGER, LORI
Address: 13330 S ISTACHATTA RD
City-St-Zip: FLORAL CITY, FL 34436

Title: VSD () Delete
Name: STANGER, WARREN LYNN
Address: 13330 S ISTACHATTA RD
City-St-Zip: FLORAL CITY, FL 34436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORI J. STANGER

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

Date