

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002538

FILED
Apr 20, 2007
Secretary of State

Entity Name: CANAL WOOD, L.L.C.

Current Principal Place of Business:

2430 N. MAIN ST.
CONWAY, SC 29526

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 260010
CONWAY, SC 29528

New Mailing Address:

FEI Number: 57-1110464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THARPE, DONNIE
2431 HIGHWAY 71 SOUTH
MARIANNA, FL 32446 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PRIDGEN, JAMES P
Address: 4311-B LUDGATE ST.
City-St-Zip: LUMBERTON, NC 28358

Title: MGRM () Delete
Name: MCCALL, ALLEN
Address: 419 BRETTWOOD AVE.
City-St-Zip: FLORENCE, SC 29501

Title: MGRM () Delete
Name: STONE, DENNIS
Address: 4311-B LUDGATE ST.
City-St-Zip: LUMBERTON, NC 28358

Title: MGRM () Delete
Name: HARRELSON, T. CARROLL
Address: 2534 KENWICK RD.
City-St-Zip: FLORENCE, SC 29501

Title: MGRM () Delete
Name: MCMAHAN, GARY D
Address: P.O. BOX 346
City-St-Zip: DILLON, SC 29536

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: TONI H. SHIRK

V.P.

04/20/2007

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