2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2006 8:00 am
Secretary of State
01-19-2006 90069 035 ***150.00

DOCUMENT # M52527

1. Entity Name
SOUTHERN PINE LUMBER COMPANY OF BOYNTON BEACH, INC.

Principal Place of Business
1100 WEST INDUSTRIAL AVENUE
BOYNTON BEACH, FL 33426

Mailing Address
250 NE DIXIE HIGHWAY
SUITE 2
STUART, FL 34994

01062006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2818141 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KOZELL, RICHARD S. JR. 250 NE DIXIE HIGHWAY SUITE 2 STUART, FL 34994	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST KOZELL, RICHARD S. 1100 W. INDUSTRIAL AVE. BOYNTON BEACH, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-Pres Cangiano, Vincent L 250 NE Dixie Hwy Stuart, FL 34994 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KOZELL, THERESA A 1100 W INDUSTRIAL AVE BOYNTON BEACH, FL 33426 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: Richard S. Kozell Jr. 1/13/06 (772) 692-2300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #