2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jul 26, 2004 08:00 AM DOCUMENT # P00000036361 Secretary of State 1. Entity Name SPLINTER WOOD PRODUCTS, INC. Mailing Address Principal Place of Business 4688 NAVASSA LANE 4688 NAVASSA LANE NAPLES, FL 34119 NAPLES, FL 34119 07212004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 23-2316514 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WINSLOW, CARL H JR. DO NOT WRITE 1415 DEAN ST., SUITE 107 FT. MYERS, FL 33901 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 Added to Fees corporation did not receive the prior notice. Trust Fund Contribution. Due by September 8, 2004 OFFICERS AND DIRECTORS 10. RRE NAME WALTER, WILLIAM J STREET ADDRESS 4688 NAVASSA LANE City-ST-ZIP NAPLES, FL 34119 U00000168301 07/26/04-80008-007 150.00 7171.0 NAME STREET ADDRESS CITY ST-21P TITLE NAME STREET ADDRESS DO NOT WRITE CMY-ST-ZIP IN THIS SPACE SSTEE NAME STREET ADDRESS CITY-ST-ZIP HILE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 drustle amplified to explute this report as required by Chapter 807, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an officers with all otherwise empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS GITY-ST-7(P