

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051464

FILED
Apr 30, 2005
Secretary of State

Entity Name: MCARDLE TIMBER ENTERPRISES, INC.

Current Principal Place of Business:

4360 COOPER LANE
HOLT, FL 32564

New Principal Place of Business:

Current Mailing Address:

4360 COOPER LANE
HOLT, FL 32564

New Mailing Address:

FEI Number: 59-3722155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDUFFIE, MICHAEL S
797 NORTH PEARL STREET
CRESTVIEW, FL 32536 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: DPS () Delete
Name: MCARDLE, SHEAMUS
Address: 4360 COOPER LANE
City-St-Zip: HOLT, FL 32564

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCARDLE, SHEAMUS PRES
Address: 4360 COOPER LANE
City-St-Zip: HOLT, FL 32564

Title: DIR () Change (X) Addition
Name: HARRIS, GARY P SEC
Address: 3131 CLARK ROAD 202
City-St-Zip: SARASOTA, FL 34231

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GARY P HARRIS

DIR

04/30/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date