



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

| | | |
|--|---|---|
| DOCUMENT # P02000000981 | |  |
| 1. Entity Name C & B TIMBER INC | | |
| Principal Place of Business 13143 HWY 100 BUNNELL, FL 32110 | | Mailing Address 13143 HWY 100 BUNNELL, FL 32110 |
| DO NOT WRITE IN THIS SPACE | | |
| | |  01232006 No Chg-P CR2E034 (11/05) |
| 4. FEI Number 01-0552676 | | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required |
| 6. Name and Address of Current Registered Agent | | |
| SANDERS, BRENDA 131 43 HWY 100 W BUNNELL, FL 32110 | | DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____ | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
| | | U00000544011 05/11/06-80018-007 150.00 |
| 10. OFFICERS AND DIRECTORS | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SANDERS, CHARLES 13143 HWY 100 W BUNNELL, FL 32110 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V SANDERS, BRENDA 13143 HWY 100 W BUNNELL, FL 32110 | |
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| DO NOT WRITE IN THIS SPACE | | |
| 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: <u>Brenda J. Sanders Brenda J. Sanders</u> | | <u>4-26-06</u> <u>386-586-0822</u> |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | <small>Date Daytime Phone #</small> |