


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 27, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000013625**  
 1. Entity Name  
**HOWELL LOGGING, INC.**



Principal Place of Business      Mailing Address  
**20253 NE 20TH STREET**      **20253 NE 20TH STREET**  
**WILLISTON, FL 32696**      **WILLISTON, FL 32696**

**DO NOT WRITE IN THIS SPACE**



03262008    No Chg-P    CR2E034 (11/05)

4. FEI Number  
**80-0036228**      Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**HOWELL, TERREL**  
**20253 NE 20TH STREET**  
**WILLISTON, FL 32696**

**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 \_\_\_\_\_  
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, 2008 Fee will be \$850.00**

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

U00000870824  
 04/09/08-80107-016 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOWELL, TERREL 20253 NE 20TH STREET WILLISTON, FL 32696
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HOWELL, DIXIE 20253 NE 20TH ST WILLISTON, FL 32696
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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:** *Terrel Howell*      3-26-08      352 528 26 98  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #