# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 26, 2007**
**Secretary of State**

DOCUMENT# P02000038377

**Entity Name:** THE LUMBER CONNECTION INC.

**Current Principal Place of Business:**

4397 E. MAIN MAST CT
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

4397 E MAINMAST CT
FT MYERS, FL 33919

**New Mailing Address:**

**FEI Number: 30-0088491** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ION, CHARLES
4397 E MAINMAST CT
FT MYERS, FL 33919 US

**Name and Address of New Registered Agent:**

ION, CHARLES S
4397 E MAINMAST CT
FT MYERS, FL 33919 US

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: CHARLES ION 01/26/2007
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: ION, CHARLES
Address: 4397 E MAINMAST CT
City-St-Zip: FT MYERS, FL 33919

Title: S ( ) Delete
Name: ION, JENNETTE S
Address: 4397 E. MAIN MAST CT.
City-St-Zip: FORT MYERS, FL 33919

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition
Name: ION, CHARLES SEC;
Address: 4397 E MAINMAST CT
City-St-Zip: FT MYERS, FL 33919

Title: P (X) Change ( ) Addition
Name: ION, STEVEN J PRES.
Address: 19102 CELLINE PLACE
City-St-Zip: LUTZ, FL 33549

Title: VP ( ) Change (X) Addition
Name: ION, DAVID J V.P.
Address: P.O. BOX 272473
City-St-Zip: TAMPA, FL 33588

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CHARLES ION D 01/26/2007
Electronic Signature of Signing Officer or Director Date