2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055103

Entity Name: WBJ CARPENTRY, INC.

FINNEMORE, JOSEPH D

() Delete

360 DUNCAN LOOP W. BLD. 16 APT 102

JONES, ANDREW R DIRECTO

1628 SUMMIT ST.

DUNEDIN, FL 34698

DUNEDIN, FL 34698

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

FILED Feb 11, 2008 Secretary of State

Current P	e of Business:		New Principal Place of Business:			
	NIA AVE STE RBOR, FL 34			755 FLORII SUITE 6 PALM HAR		34683
Current Mailing Address:				New Mailing Address:		
	NIA AVE STE RBOR, FL 34			P.O. BOX 2 PALM HAR		34682
FEI Number:	: 87-0696623	FEI Number Applied	d For () FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
BEALL, BRADLEY L 973 VIRGINIA AVE STE 11 PALM HARBOR, FL 34683 US				BEALL, BRADLEY L 755 FLORIDA AVE SUITE 6 PALM HARBOR, FL 34683 US		
	named entity e of Florida.	submits this stateme	ent for the purpose o	f changing it	ts registere	ed office or registered agent, or both,
SIGNATURE: BRAD L. BEALL				02/11/2008		
	Electro	onic Signature of Reg	istered Agent			Date
Election Car	npaign Financi	ng Trust Fund Contribu	tion ().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DPT (BEALL, BRAD 24224 LAKER LUTZ, FL 33	RUSH CT.		Title: Name: Address: City-St-Zip:		() Change () Addition
Title:	DVS () Delete		Title:	DVS	(X) Change () Addition

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

MOLE, JOSEPH P

1766 RAMBLING RIDGE CT.

() Change () Addition

PALM HARBOR, FL 34683

I hereby certify that the information supplied with this filing does not qualify 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: BRAD L. BEALL DPT 02/11/2008