2007 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P03000099272 1. Entity Name PREMIER WOODWORKERS, INC. Principal Place of Business 920 19TH STREET PALM HARBOR, FL 34683 US Mailing Address 920 19TH STREET PALM HARBOR, FL 34683 US

FILED Feb 28, 2007 08:00 AM Secretary of State

PALM HARB		PALM HARBOR, FL 34683	US				
D	OO NOT WRITE II	CE	02262007 4. FEI Numbe 20-0216	No Chg-P		34 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
	6. Name and Address of Current Regis						
HEMPHILL, JERRY 920 19TH STREET PALM HARBOR, FL 34683			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	red when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finantity Trust Fund Contribution.				5.00 May Be			
10.	OFFICERS AND DIREC	CTORS		,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,T HEMPHILL, JERRY 920 19TH STREET PALM HARBOR, FL 34683						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HARRIMAN, DANIEL 11744 EVENINGWOOD COURT NEW PORT RICHEY, FL 34655			i	U000006 03/08/07-8	50695 0024-0	001 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HEMPHILL, BILLEE 920 19TH STREET PALM HARBOR, FL 34683			DO	NOT W	'RITI	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							:

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:

MANNE AND THE DESIDENT DESIDEN