2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136406

VERO BEACH, FL 32963

City-St-Zip:

THOMAS WRIGHT - FINE WOOD WORK INC

FILED Mar 15, 2004 Secretary of State

Entity Nai	me: THOMAS	S WRIGHT - FINE WOOD WO	RK, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	INERS WAY ACH, FL 3296	3			
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
	INERS WAY ACH, FL 3296	3			
FEI Number:	: 20-0408052	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
3490 MAŘ VERO BEA	THOMAS G INERS WAY ACH, FL 3296		ournose of changing its registered	d office or registered agent, or both,	
	e of Florida.	submits this statement for the p	ourpose of changing its registered	Tollice of registered agent, or both,	
SIGNATUR	RE:				
	Electron	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (WRIGHT, THO 3490 MARINEF VERO BEACH,	RS WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP (WRIGHT, THO 3490 MARINER		Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS G. WRIGHT P 03/15/2004