

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136686

FILED
Jan 19, 2005
Secretary of State

Entity Name: BERNIER WOODWORKING, INC.

Current Principal Place of Business:

4673 E HWY 20
NICEVILLE, FL 32578 US

New Principal Place of Business:

1090 BEAL PARKWAY NW
FORT WALTON BEACH, FL 32547 US

Current Mailing Address:

4673 E HWY 20
NICEVILLE, FL 32578 US

New Mailing Address:

1752 NANCY WARD COVE
NICEVILLE, FL 32578 US

FEI Number: 20-0408961

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERSON, JOHN D
912 S PALM BLVD
SUITE E
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BERNIER, DAVID A
Address: 1752 NANCY WARD COVE
City-St-Zip: NICEVILLE, FL 32578 US

Title: VP () Delete
Name: BERNIER, JOANNA L
Address: 1752 NANCY WARD COVE
City-St-Zip: NICEVILLE, FL 32578 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DAVID A. BERNIER

P

01/19/2005

Electronic Signature of Signing Officer or Director

Date