2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000146096

FILED Jun 01, 2007 Secretary of State

Entity Name: SOUTHERN WOODWORKS OF NORTHWEST FLORIDA INC.

Current Principal Place of Business: New Principal Place of Business:

6451 MOONLIGHT LANE 6110 BLUEBERRY LANE CRESTVIEW, FL 32539 CRESTVIEW, FL 32536

Current Mailing Address: New Mailing Address:

6451 MOONLIGHT LANE 6110 BLUEBERRY LN CRESTVIEW, FL 32539 CRESTVIEW, FL 32536

FEI Number: 92-0185364 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:

COON, DANIEL W
6451 MOONLIGHT LANE
CRESTVIEW, FL 32539 US

COON, DANIEL W
6110 BLUEBERRY LANE
CRESTVIEW, FL 32536 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: 06/01/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 COON, DANIEL W
 Name:
 COON, DANIEL W

 Address:
 6451 MOONLIGHT LANE
 Address:
 6110 BLUEBERRY LANE

 City-St-Zip:
 CRESTVIEW, FL 32539
 City-St-Zip:
 CRESTVIEW, FL 32536

Title: SV () Delete Title: SV (X) Change () Addition

Name: COON, JILLIAN Name: COON, JILLIAN

 Address:
 6451 MOONLIGHT LANE
 Address:
 6110 BLUEBERRY LANE

 City-St-Zip:
 CRESTVIEW, FL 32539
 City-St-Zip:
 CRESTVIEW, FL 32536

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: DANIEL W COON P 06/01/2007