

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000033487

Entity Name: J AND W TIMBER HARVEST, INC.

FILED  
Feb 02, 2009  
Secretary of State

## Current Principal Place of Business:

7150 NW 22 DR  
JENNINGS, FL 32053

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 505  
JENNINGS, FL 32053

## New Mailing Address:

P.O. BOX 180  
JENNINGS, FL 32053

FEI Number: 34-1980131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAW, JEFFERY W SR.  
7150 NW 22 DR  
JENNINGS, FL 32053 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: MR ( ) Delete  
Name: LAW, JEFFERY W SR  
Address: 7150 NW 22 DR  
City-St-Zip: JENNINGS, FL 32053

Title: MR ( ) Delete  
Name: HAMM, CODY M  
Address: 7216 NW 22ND DRIVE  
City-St-Zip: JENNINGS, FL 32053

## 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 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: JEFFERY W. LAW, SR.

MR.

02/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date