2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000085713 1. Entity Name S AND S DRIGGERS TIMBER, INC



FILED
Mar 21, 2007 08:00 AM
Secretary of State

Principal Place of Business

151 EAST RIVER RD EAST PALATKA, FL 32131 Mailing Address
151 EAST RIVER RD
EAST PALATKA, FL 32131

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4. FEI Number		Applied For
03-0550810		Not Applicable
5. Certificate of Status Desired		5 Additional aguired

6. Name and Address of Current Registered Agent

DRIGGERS, STEPHEN D 151 EAST RIVER RD EAST PALATKA, FL 32131

STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

the obligat	lions of registered agent.		1		500	
SIGNATURE	Signature, typed or printed name of registered agent and title it	Phen applicable.	D Driggers (NOTE: Registered Agent signatur	e required when reinstating)	3-17-0 8 soo	
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00		ation Campaign Financing t Fund Contribution.	\$5.00 May Be Added to Fees	U00000674181 03/29/07-80058-010 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DRIGGERS, STEPHEN D 151 EAST RIVER RD EAST PALATKA, FL 32131	TORS				
TITLE NAME : STREET ADDRESS CITY-ST-ZIP	ST DRIGGERS, SHARON L 151 EAST RIVER RD EAST PALATKA, FL 32131					
TITLE NAME STREET AODRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME		į	1			

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

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: Signature and typed or profited name of signing officer or Director Date Date Design Phone #