2007 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P04000137129 1. Entity Name PANHANDLE TIMBER AND HOLDINGS, INC. Principal Place of Business 429 SOUTH TYNDALL PKWY. STE. H CALLAWAY, FL 32404 DO NOT WRITE IN THIS SPACE

FILED
May 01, 2007 08:00 AM
Secretary of State



04302007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 20-1954743 Not Applicable

5. Cartificate of Status Desired Status Posited Posited Status Posited Status Posited Status Posited Status Posited Status Posited Status Posited Posi

5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

GILLETTE, JAMES L 429 SOUTH TYNDALL PKWY. STE H CALLAWAY, FL 32404

SIGNATURE:

DO NOT WRITE IN THIS SPACE

the obligations of registered agent,						
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			· -	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS	The state of the s			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RIGBY, RICHARD 429 SOUTH TYNDALL PKWY. STE H CALLAWAY, FL 32404					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GILLETTE, J. L P.O. BOX 214 PANAMA CITY, FL 32402					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000753041	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					05/22/07-80004-023 150.00	
12. I hereby certify that the information supplied with this filling 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 gifter like empowered.						

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