

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027493

Entity Name: SRV WOOD WORKS INC

FILED
Apr 21, 2006
Secretary of State

Current Principal Place of Business:

2787 MEREDITH ROAD
PONCE DE LEON, FL 32455

New Principal Place of Business:

Current Mailing Address:

PO BOX 729
PONCE DE LEON, FL 32455

New Mailing Address:

FEI Number: 20-2376887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DARANY, SAM G
2787 MEREDITH ROAD
PONCE DE LEON, FL 32455 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: POPHAM, VIVIAN C
Address: 2787 MEREDITH ROAD
City-St-Zip: PONCE DE LEON, FL 32455

Title: SEC () Delete
Name: DARANY, SAM G
Address: 2787 MEREDITH ROAD
City-St-Zip: PONCE DE LEON, FL 32455

Title: VP () Delete
Name: BROWNLEE, ROBERT
Address: PO BOX 729
City-St-Zip: PONCE DE LEON, FL 32455

Title: VP () Delete
Name: ADAMS, SCOTT D
Address: 2092 HIGHWAY 81
City-St-Zip: WESTVILLE, FL 32464

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: WARD, MICHAEL W
Address: 2787 MEREDITH ROAD
City-St-Zip: PONCE DE LEON, FL 32455

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 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: SAM DARANY

SEC

04/21/2006

Electronic Signature of Signing Officer or Director

Date