## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000035589

Entity Name: CLASSIC WOOD DESIGN, INC

FILED Jan 25, 2007 Secretary of State

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

5027 24 ST. SW 3800 FOWLER STREET

LEHIGH ACRES, FL 33971 US

FORT MYERS, FL 33901 US

Current Mailing Address: New Mailing Address:

5027 24 ST. SW 3800 FOWLER STREET LEHIGH ACRES, FL 33971 US 3

FORT MYERS, FL 33901 US

FEI Number: 20-2578385 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:

TAX HOUSE CORPORATION
1261 E SAMPLE ROAD SUITE-6
11601 S CLEVELAND

FORT MYERS, FL, FL 33907 US 6 FORT MYERS, FL, FL 33907 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: TAX HOUSE CORPORATION 01/25/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 DE ALMEIDA NETO, OLEVINO P

 Name:
 DE ALMEIDA NETO, OLEVINO P

 Address:
 5027 24 ST. SW
 Address:
 3800 FOWLER STREET

 City-St-Zip:
 LEHIGH ACRES, FL 33971 US
 City-St-Zip:
 FORT MYERS, FL 33901 US

Title: VP ( ) Delete Title: V (X) Change ( ) Addition

 Name:
 DINGER, SAMUEL
 Name:
 GARCIA, JAQUELINE M

 Address:
 5027 24 ST. SW
 Address:
 3800 FOWLER STREET

 City-St-Zip:
 LEHIGH ACRES, FL 33971
 City-St-Zip:
 FORT MYERS, FL 33901

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

 Name:
 GARCIA, JACQULINE M
 Name:

 Address:
 2438 LOLA ST
 Address:

 City-St-Zip:
 LEHIGH ACRES, FL 33971
 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: OLEVINO P DE ALMEIDA NETO P 01/25/2007