

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000016268

FILED
Aug 25, 2009
Secretary of State

Entity Name: WOOD WORKS INTERIORS INC

Current Principal Place of Business:

16200 VILLE DRIVE
HUDSON, FL 34667 US

New Principal Place of Business:

16200 VILLA DRIVE
HUDSON, FL 34667 US

Current Mailing Address:

16200 VILLA DRIVE
HUDSON, FL 34667 US

New Mailing Address:

FEI Number: 20-0779037 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIPPLY, LEONARD
16200 VILLA DRIVE
HUDSON, FL 34667 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LIPPLY, LEONARD
Address: 16200 VILLA DRIVE
City-St-Zip: HUDSON, FL 34667 US

Title: SD () Delete
Name: LIPPLY, ROCHELLE
Address: 16200 VILLA DRIVE
City-St-Zip: HUDSON, FL 34667 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T () Change (X) Addition
Name: STONE, JEFFERY R
Address: 9238 BINNACLE DR APT 824
City-St-Zip: PORT RICHEY, FL 34668 US

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: ROSCHELLE D. LIPPLY

SD

08/25/2009

Electronic Signature of Signing Officer or Director

_____ Date