2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# P06000105800

Entity Name: WOOD SPECIALTY PRODUCTS, INC.

Current Principal Place of Business:

1919 GLYNN AVE SUITE 48
BRUNSWICK, GA 31520

New Principal Place of Business:

Current Mailing Address:

1919 GLYNN AVE SUITE 48
BRUNSWICK, GA 31520

New Mailing Address:

FEI Number: 20-5426120 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BALL, JOHN W
1022 PARK STREET SUITE 407
JACKSONVILLE, FL 32204 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: DS ( ) Delete
Name: STUBBS, JOHN A
Address: 1919 GLYNN AVE SUITE 48
City-St-Zip: BRUNSWICK, GA 31520

Title: D ( ) Delete
Name: JERNIGAN, ROBY H
Address: 5894 NEW JESUP HWY
City-St-Zip: BRUNSWICK, GA 31523

Title: DP ( ) Delete
Name: JERNIGAN, CHARLES L
Address: 1919 GLYNN AVE SUITE 48
City-St-Zip: BRUNSWICK, GA 31520

Title: DS ( ) Delete
Name: STUBBS, DARCY E
Address: 1919 GLYNN AVE SUITE 48
City-St-Zip: BRUNSWICK, GA 31520

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOHN A STUBBS DS 01/09/2007

Electronic Signature of Signing Officer or Director — Date