

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000023823

FILED
May 01, 2008
Secretary of State

Entity Name: CARPENTER AMERICA CORP

Current Principal Place of Business:

27 E SKYLARK ST
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

P O BOX 633
APOPKA, FL 32704

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAPIDO TAX SERVICES INC
385 E MAIN ST
APOPKA, FL 32703 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 ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SALAZAR, ROBERTO
Address: P O BOX 633
City-St-Zip: APOPKA, FL 32704

Title: VP () Delete
Name: GASPAR, JUAN
Address: P O BOX 633
City-St-Zip: APOPKA, FL 32704

Title: SEC () Delete
Name: GUZMAN, MAURO
Address: P O BOX 633
City-St-Zip: APOPKA, FL 32704

Title: TES () Delete
Name: MENDEZ, RUBEN
Address: P O BOX 633
City-St-Zip: APOPKA, FL 32704

Title: DIR () Delete
Name: BUSTAMANTE, SANJUANA
Address: P O BOX 633
City-St-Zip: APOPKA, FL 32704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: FUENTES, ELMO
Address: P O BOX 633
City-St-Zip: APOPKA, FL 32704

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

Title: TES (X) Change () Addition
Name: FUENTES, BENJAMIN
Address: P O BOX 633
City-St-Zip: APOPKA, FL 32704

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

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: ROBERTO SALAZAR

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date