



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P93000011919		
1. Entity Name SPECIALTY WOODS MILLWORK, INC.		
Principal Place of Business 5161 HWY 98 WEST SANTA ROSA BEACH, FL 32459		Mailing Address 5161 HWY 98 WEST SANTA ROSA BEACH, FL 32459
DO NOT WRITE IN THIS SPACE		
		
01222007 No Chg-P CR2E034 (11/05)		
4. FEI Number 59-3165160		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
CHRISTOPHER, REBECCA B 5375 HIGHWAY 98 EAST #E2 DESTIN, FL 32541		DO NOT WRITE IN THIS SPACE
6. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		8. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		U00000604734 01/30/07-80006-015.150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TERRY, JOHN H JR 4850 HIGHWAY 98 EAST DESTIN, FL 32541	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CHRISTOPHER, REBECCA B 9950 HWY 98 WEST, E2 DESTIN, FL 32550	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHRISTOPHER, ALTON H 9950 HWY 98 WEST, E-2 DESTIN, FL 32550	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Rebecca B. Christopher</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>Jan 19, 2007</u> <u>850-267-1122</u> <small>Date Daytime Phone #</small>