

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000030037

FILED  
Apr 18, 2007  
Secretary of State

Entity Name: MORTON WOODWORKERS, INC.

## Current Principal Place of Business:

227 FLORIDA AVE  
GULF BREEZE, FL 32561 US

## New Principal Place of Business:

## Current Mailing Address:

227 FLORIDA AVE  
GULF BREEZE, FL 32561 US

## New Mailing Address:

FEI Number: 59-3179528      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORTON, SHAY C  
227 FLORIDA AVENUE  
GULF BREEZE, FL 32564 US

## Name and Address of New Registered Agent:

MORTON, NEIL A  
227 FLORIDA AVENUE  
GULF BREEZE, FL 32561 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: NEIL ALLAN MORTON

04/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MORTON, N A  
Address: 227 FLORIDA AVENUE  
City-St-Zip: GULF BREEZE, FL 32561

Title: D ( ) Delete  
Name: MORTON, SHAY C  
Address: 227 FLORIDA AVENUE  
City-St-Zip: GULF BREEZE, FL 32561

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: D ( ) Change (X) Addition  
Name: MORTON, MATTHEW C  
Address: 227 FLORIDA AVENUE  
City-St-Zip: GULF BREEZE, FL 32561

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: NEIL ALLAN MORTON

D

04/18/2007

Electronic Signature of Signing Officer or Director

Date