2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000040779

Entity Name: F & R TRUSS COMPANY, INC.

FILED Apr 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3305 HWY 90 E. BONIFAY, FL 32425 US **Current Mailing Address: New Mailing Address:** PO BOX 1123 BONIFAY, FL 32425 US FEI Number: 59-3223711 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARRISON, RONALD D HARRISON, RONALD D HWY 90 EAST HWY 90 EAST P.O. BOX 1123 3299 HWY 90 EAST BONIFAY, FL 32425 US BONIFAY, FL 32425 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: RONALD D HARRISON 04/04/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HARRISON, RONALD D Name: Name: HWY 90 EAST Address: Address: City-St-Zip: BONIFAY, FL City-St-Zip: Title: SD Title: () Delete () Change () Addition HARRISON, FRANCES Name: Name: HWY 90 EAST Address: Address: BONIFAY, FL City-St-Zip: City-St-Zip: () Delete Title: VPD Title: (X) Change () Addition VPD HARRISON, SHELLY D HARRISON, SHELLY D Name: Name: P.O. BOX 1123 HWY 90 FAST Address: Address: City-St-Zip: BONIFAY, FL 32425 City-St-Zip: BONIFAY, FL 32425 Title: **VPD** () Delete Title: VPD (X) Change () Addition HARRISON, SHAWN M HARRISON, SHAWN M Name: Name: Address: P.O. BOX 1123 Address: HWY 90 EAST City-St-Zip: City-St-Zip: BONIFAY, FL 32425 BONIFAY, FL 32425

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: SHELLY D. HARRISON VPD 04/04/2007