2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P95000013944

Entity Name: CLASSIC WOOD CREATIONS, INC.

Current Principal Place of Business:

435 5TH STREET SOUTH
SAFETY HARBOR, FL 34695

New Principal Place of Business:

2140 BOW LANE
SAFETY HARBOR, FL 34695

Current Mailing Address:

435 5TH STREET SOUTH
SAFETY HARBOR, FL 34695

New Mailing Address:

2140 BOW LANE
SAFETY HARBOR, FL 34695

FEI Number: 59-3294845 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAWKINS, BOB
435 5TH STREET SOUTH
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

HAWKINS, BOB
2140 BOW LANE
SAFETY HARBOR, FL 34695 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: 04/27/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HAWKINS, BOB
Address: 435 5TH STREET SOUTH
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HAWKINS, BOB
Address: 2140 BOW LANE
City-St-Zip: SAFETY HARBOR, FL 34695

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: BOB HAWKINS D 04/27/2007
Electronic Signature of Signing Officer or Director — Date