2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000025351

Title:

Name:

Address: City-St-Zip: () Delete

ZEIGLER, GENE

LAKE CITY, FL 32056

P.O. BOX 1360

FILED Jan 23, 2008 Secretary of State

Entity Name: LUMBER DEALERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 635 SE ST RD 100 LAKE CITY, FL 32025 US **Current Mailing Address: New Mailing Address:** PO BOX 1360 LAKE CITY, FL 32056 US FEI Number: 59-3369879 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: SIBBERNSEN, PAT 370 SW RIDGEVIEW PL LAKE CITY, FL 32024 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SIBBERNSEN, PAT SIBBERNSEN, PAT Name: Name: 370 SW RIDGEVIEW PL 370 SW RIDGEVIEW PL Address: Address: City-St-Zip: LAKE CITY, FL 32024 City-St-Zip: LAKE CITY, FL 32024 Title: Title: () Delete (X) Change () Addition GRIFFIN, KIM GRIFFIN, KIM Name: Name: 2109 WESLEY CHAPEL RD 2109 WESLEY CHAPEL RD Address: Address: PAVO, GA 31778 City-St-Zip: PAVO. GA 31778 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: PATRICK SIBBERNSEN **PRES** 01/23/2008

() Change () Addition