

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2007 08:00 AM
Secretary of State

DOCUMENT # P97000001748

1. Entity Name
PEDDY LUMBER COMPANY



Principal Place of Business
**5925 IMPERIAL PARKWAY
SUITE 124
MULBERRY, FL 33860**

Mailing Address
**P.O. BOX 6779
LAKELAND, FL 33807-6779**



02212007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3420220

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PEDDY, ALBRY J
5071 NORRISWOOD
MULBERRY, FL 33860**

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
P
NAME
PEDDY, ALBRY J
STREET ADDRESS
5071 NORRISWOOD
CITY-ST-ZIP
MULBERRY, FL 33860

TITLE
VP
NAME
PEDDY, DAVID
STREET ADDRESS
2424 CAMBRIDGE AVENUE
CITY-ST-ZIP
LAKELAND, FL 33803

TITLE
ST
NAME
PEDDY, UNIS H
STREET ADDRESS
5071 NORRISWOOD
CITY-ST-ZIP
MULBERRY, FL 33860

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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03/22/07-80033-021 158.75

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IN THIS SPACE**

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:

Albry J. Peddy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**ALBRY J. PEDDY
PRESIDENT**

Date

863/647-3939
Daytime Phone #