

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000011289

FILED  
Apr 29, 2004  
Secretary of State

Entity Name: BACKWOODS TECHNOLOGY, INC.

## Current Principal Place of Business:

409 MAIN STREET  
DESTIN, FL 32541

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1462  
DESTIN, FL 32540

## New Mailing Address:

FEI Number: 59-3446148

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SKINNER, HELEN A  
409 MAIN STREET  
DESTIN, FL 32541

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: SKINNER, S. DANA  
Address: PO BOX 1462 N/A  
City-St-Zip: DESTIN, FL 32540

Title: VP ( ) Delete  
Name: SKINNER, DAVID  
Address: 7 LAKE SHORE CT.  
City-St-Zip: MCDONOUGH, GA 30253

Title: S ( ) Delete  
Name: SKINNER, SUSIE  
Address: PO BOX 1462 N/A  
City-St-Zip: DESTIN, FL 32540

Title: T ( ) Delete  
Name: SKINNER, HELEN  
Address: 409 MAIN ST.  
City-St-Zip: DESTIN, FL 32541

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: S. DANA SKINNER

PRES

04/29/2004

Electronic Signature of Signing Officer or Director

Date