## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000056144

Entity Name: DEER POINT TIMBER PRODUCTS, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3342 COWAN RD 8223 RESOTA BEACH ROAD PANAMA CITY, FL 32409 SOUTHPORT, FL 32409

Current Mailing Address: New Mailing Address:

3342 COWAN RD 8223 RESOTA BEACH ROAD PANAMA CITY, FL 32409 SOUTHPORT, FL 32409

FEI Number: 59-3519547 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:

ELLISOR, ADAM
3342 COWAN RD
PANAMA CITY, FL 32409 US

ELLISOR, ADAM
8223 RESOTA BEACH ROAD
SOUTHPORT, FL 32409 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: KIMBERLY P ELLISOR 04/23/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVT ( ) Delete Title: PVT (X) Change ( ) Addition

 Name:
 ELLISOR, ADAM
 Name:
 ELLISOR, ADAM

 Address:
 3342 COWAN RD
 Address:
 8223 RESOTA BEACH ROAD

 City-St-Zip:
 PANAMA CITY, FL 32409
 City-St-Zip:
 SOUTHPORT, FL 32409

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: ELLISOR, ADAM Name: ELLISOR, ADAM

 Address:
 3342 COWAN RD
 Address:
 8223 RESOTA BEACH ROAD

 City-St-Zip:
 PANAMA CITY, FL 32409
 City-St-Zip:
 SOUTHPORT, FL 32409

Title: S () Delete Title: S (X) Change () Addition

Name:ELLISOR, KIMBERLYName:ELLISOR, KIMBERLYAddress:3342 COWN RDAddress:8223 RESOTA BEACH ROADCity-St-Zip:PANAMA CITY, FL 32409City-St-Zip:SOUTHPORT, FL 32409

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: KIMBERLY P ELLISOR S 04/23/2007