2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 02, 2007
Secretary of State

DOCUMENT# P99000052730

Entity Name: LIBERTY POST & BARN POLE, INC.

Current Principal Place of Business:

P.O. BOX 985
13131 NW FM HARRELL HWY
BRISTOL, FL 32321

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 985
HWY. 12 SOUTH
BRISTOL, FL 32321

New Mailing Address:

FEI Number: 59-3578035 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, ALVIN
673 HIGHWAY 71
MARIANNA, FL 32448 US

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: WILLIAMS, ALVIN
Address: 673 HIGHWAY 71
City-St-Zip: MARIANNA, FL 32448

Title: ST ( ) Delete
Name: WILLIAMS, DENISE
Address: P.O. BOX 215
City-St-Zip: BRISTOL, FL 32321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ALVIN WILLIAMS P 01/02/2007

Electronic Signature of Signing Officer or Director — Date