



**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000062480 1. Entity Name WOODWORKERS' LUMBER & TOOL SUPPLY, INC.	
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Principal Place of Business 2685 S.E. 58TH AVENUE OCALA, FL 34471	Mailing Address 2685 S.E. 58TH AVENUE OCALA, FL 34471
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DO NOT WRITE IN THIS SPACE

FILED
04 OCT -1 PM 1:42
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



06072004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3590568	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DUNCAN, STANTON L 11 CEDAR TRACE TERR OCALA, FL 34483	DO NOT WRITE IN THIS SPACE
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DUNCAN, STANTON L 11 CEDAR TRACE TERR OCALA, FL 34483
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900041556609
10/04/04--01014--007 **550.00

**DO NOT WRITE
IN THIS SPACE**

Stan Duncan

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Stan Duncan **Stan Duncan** **9/30/04** **352 694 2106**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #