2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000082350

Entity Name: SAVANNAH MILLWORK COMPANY

FILED Apr 30, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

3953 S.W. BRUNER TERRACE 2300 SW POMA DRIVE PALM CITY, FL 34990 PALM CITY, FL 34990

Current Mailing Address: New Mailing Address:

3953 S.W. BRUNER TERRACE 2300 SW POMA DRIVE PALM CITY, FL 34990 PALM CITY, FL 34990

FEI Number: 65-0946352 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

N. DEAN KOHL, JR. 50 SE KINDRED STREET SUITE 107 STUART, FL 34994 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SNOW, GLEN R
 Name:
 SNOW, GLEN R

 Address:
 3953 SW BRUNNER TERR
 Address:
 2300 SW POMA DRIVE

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 PALM CITY, FL 34990

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

 Name:
 SNOW, DARCY
 Name:
 SNOW, DARCY

 Address:
 3953 SW BRUNNER TERR
 Address:
 2300 SW POMA DRIVE

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 PALM CITY, FL 34990

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: GLEN SNOW PD 04/30/2008