## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2007 8:00 am Secretary of State

1. Entity Nam	MENT # \$22490 WOOD, INC.					05-01-2007	7 90030 (	)O1 ***13		
Principal Place of Business 1505 B SOUTH MCCALL RD ENGLEWOOD, FL 34223 US		Mailing Address 16528 N DALE MABRY HWY TAMPA, FL 33618 US								
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt. #. etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01152007	Chg-P	CR2E0	34 (12/06)		
City & State		City & State			4. FEI Number	160		<del>}</del>	plied For	
Zip	Country	Zip	Coun	try	65-0239 5. Certificate of	Status Desired		\$8.75 Add		
	6. Name and Address of Curre	ent Registered Agent		<u></u>	7. Name and A	ddress of New R		Fee Require	0	
SANDERS	S, WALTER			Name						
16528 N D TAMPA, FI	ALE MABRY HWY				Street Address (P.O. Box Number is Not Acceptable)					
	į iš			City		-	FL	Zip Cod	e	
8. The above the obligat	e named entity submits this statemer tions of registered agent.  Walter was a statemer Signature, types to almost name of registered a	Walter Sa	inder	C Sound signature requir		, in the state of the	4/23 DATE	107		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

1/1/1/1/1/1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/07

941-474-2664

Daytime Phone