

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 17, 2008 08:00 AM
Secretary of State**

DOCUMENT # P11121

1. Entity Name
BABCOCK LUMBER COMPANY



Principal Place of Business

6301 US HWY 41 S.
P. O. BOX 548
RUSKIN, FL 33570 US

Mailing Address

2220 PALMER ST
PITTSBURGH, PA 15218-2608 US



03102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 25-0335580	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BORNTRAEGER, CARL W
STREET ADDRESS	219 HILLCREST ROAD
CITY-ST-ZIP	PITTSBURGH, PA 15238
TITLE	CNT
NAME	FARABAUGH, GERALD E.
STREET ADDRESS	6031 BOXER DRIVE
CITY-ST-ZIP	BETHEL PARK, PA
TITLE	S
NAME	PERRY, MAXINE
STREET ADDRESS	161 POPLAR RIDGE DR
CITY-ST-ZIP	PITTSBURGH, PA 15238
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000859769
04/02/08-80035-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

K. E. Farbaugh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-08
Date

714 351 8413
Daytime Phone #