

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000019115

FILED  
Jan 05, 2004  
Secretary of State

Entity Name: WOODZ FINE CARPENTRY, INC.

**Current Principal Place of Business:**

522 N YONGE STREET  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

522 N YONGE STREET  
ORMOND BEACH, FL 32174 US

**Current Mailing Address:**

522 N YONGE STREET  
ORMOND BEACH, FL 32174

**New Mailing Address:**

522 N YONGE STREET  
ORMOND BEACH, FL 32174 US

FEI Number: 59-3623380

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOGUIDICE, JOSEPH A  
555 W GRANDE BLVD STE B-5  
ORMOND BEACH, FL 32174 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: D ( ) Delete  
Name: ZOECKER, DARREN  
Address: 2331 ANASTASIA RD.  
City-St-Zip: SOUTH DAYTONA, FL 32119

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: ZOECKER, DARREN J  
Address: 2331 ANASTASIA RD.  
City-St-Zip: SOUTH DAYTONA, FL 32119 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DARREN J. ZOECKLER

CEO

01/05/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date