

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000001869

Entity Name: GUN CABINET, INC.

FILED  
Jan 19, 2012  
Secretary of State

**Current Principal Place of Business:**

4267 SW HIGH MEADOW AVE.  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

4267 SW HIGH MEADOW AVE.  
PALM CITY, FL 34990

**New Mailing Address:**

FEI Number: 27-4478760

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSTON, WILLIAM  
4267 SW HIGH MEADOW AVE.  
PALM CITY, FL 34990 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

**OFFICERS AND DIRECTORS:**

Title: P,T  
Name: JOHNSTON, WILLIAM  
Address: 4267 SW HIGH MEADOW AVE.  
City-St-Zip: PALM CITY, FL 34990

Title: VP,S  
Name: SLAVIK, CAROLYN  
Address: 4267 SW HIGH MEADOW AVE.  
City-St-Zip: PALM CITY, FL 34990

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM JOHNSTON

V.T

01/19/2012

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

\_\_\_\_\_ Date