

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000049085

FILED
Apr 05, 2007
Secretary of State

Entity Name: GRANITE AND CABINETRY BY LUCAS, INC.

Current Principal Place of Business:

3333 S. US HWY 1
FORT PIERCE, FL 349826605

New Principal Place of Business:

Current Mailing Address:

3333 S. US HWY 1
FORT PIERCE, FL 349826605

New Mailing Address:

FEI Number: 65-0424654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUCAS, HERBERT F
491 NATALIE DR
PORT SAINT LUCIE, FL 349527902 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: PD () Delete
Name: LUCAS, HERBERT F
Address: 491 NATALIE DR
City-St-Zip: PORT ST. LUCIE, FL 349527902 US

Title: VPD () Delete
Name: LUCAS, MARIANNE
Address: 491 NATALIE DR
City-St-Zip: PORT ST. LUCIE, FL 349527902 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIANNE LUCAS

VP

04/05/2007

Electronic Signature of Signing Officer or Director

_____ Date