

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S55304

FILED
Jan 09, 2008
Secretary of State

Entity Name: MILLWORK AND DESIGN INC.

Current Principal Place of Business:

22309 RODEO DR
BROOKSVILLE, FL 34602 US

New Principal Place of Business:

Current Mailing Address:

22309 RODEO DR
BROOKSVILLE, FL 34602 US

New Mailing Address:

FEI Number: 59-3068851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENEDICT, WAYNE
22309 RODEO DR
BROOKSVILLE, FL 34602 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: P () Delete
Name: BENEDICT, WAYNE,
Address: 22309 RODEO DR
City-St-Zip: BROOKSVILLE, FL 34602

Title: V () Delete
Name: LOVERING, JOHN
Address: 710 48TH AVE N
City-St-Zip: ST PETERSBURG, FL 33703

Title: S () Delete
Name: BENEDICT, DEBORAH,
Address: 22309 RODEO DR
City-St-Zip: BROOKSVILLE, FL 34602

Title: T () Delete
Name: BENEDICT, DEBORAH
Address: 22309 RODEO DR
City-St-Zip: BROOKSVILLE, FL 34602

Title: D () Delete
Name: BENEDICT, AMY
Address: 22309 RODEO DR
City-St-Zip: BROOKSVILLE, FL 34602

Title: D () Delete
Name: BENEDICT, JOY
Address: 22309 RODEO DR
City-St-Zip: BROOKSVILLE, FL 34602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: JOHNSON, AMY
Address: 21275 AYERS RD.
City-St-Zip: BROOKSVILLE, FL 34601

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

I hereby certify that the information supplied with this filing does not qualify 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: DEBORAH BENEDICT

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01/09/2008

Electronic Signature of Signing Officer or Director

Date