Entity Name: ARCHITECTURAL Current Principal Place of Bus 790 BIG TREE DR LONGWOOD, FL 32750	- CABINETRY & FURNITURE MFC	G., INC. Secretary of State 4952471118CC
Current Mailing Address:		
790 BIG TREE DR LONGWOOD, FL 32750 US		
FEI Number: 59-3458889		Certificate of Status Desired: No
Name and Address of Current	Registered Agent:	
MAGGARD, GREG		
790 BIG TREE DR. LONGWOOD, FL 32750 US		
LONGWOOD, FL 32750 US	nt for the purpose of changing its registered office	or registered agent, or both, in the State of Florida.
LONGWOOD, FL 32750 US		or registered agent, or both, in the State of Florida. 04/30/2024
LONGWOOD, FL 32750 US The above named entity submits this statement	D	
LONGWOOD, FL 32750 US The above named entity submits this statemen SIGNATURE: GREG MAGGAR	D	04/30/2024
LONGWOOD, FL 32750 US The above named entity submits this statemen SIGNATURE: GREG MAGGAR Electronic Signature of	D	04/30/2024
LONGWOOD, FL 32750 US The above named entity submits this statemen SIGNATURE: GREG MAGGAR Electronic Signature of Officer/Director Detail :	D of Registered Agent	04/30/2024 Date
LONGWOOD, FL 32750 US The above named entity submits this statement SIGNATURE: GREG MAGGAR Electronic Signature of Officer/Director Detail : Title PRESIDENT	D of Registered Agent Title	04/30/2024 Date SECRETARY MAGGARD, GREG
LONGWOOD, FL 32750 US The above named entity submits this statement SIGNATURE: GREG MAGGAR Electronic Signature of Officer/Director Detail : Title PRESIDENT Name MAGGARD, GREG	D of Registered Agent Title Name Address	04/30/2024 Date SECRETARY MAGGARD, GREG 790 BIG TREE DR
LONGWOOD, FL 32750 US The above named entity submits this statement SIGNATURE: GREG MAGGAR Electronic Signature of Officer/Director Detail : Title PRESIDENT Name MAGGARD, GREG Address 790 BIG TREE DR	D of Registered Agent Title Name Address	04/30/2024 Date SECRETARY MAGGARD, GREG 790 BIG TREE DR

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.

Address

SIGNATURE: GREG MAGGARD

535 LEMON BLUFF

City-State-Zip: OSTEEN FL 32764

Address

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

535 LEMON BLUFF

City-State-Zip: OSTEEN FL 32764

04/30/2024

Apr 30, 2024 retarv of State **8CC**

FILED

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000062528

Date