

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G47252

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: DOORS & DRAWERS BY ANDERSON, INC.

## Current Principal Place of Business:

2621 NO FEDERAL HWY  
M  
BOCA RATON, FL 334313809 US

## Current Mailing Address:

2621 NO FEDERAL HWY  
M  
BOCA RATON, FL 334313809 US

## New Principal Place of Business:

2621 NO FEDERAL HWY  
T  
BOCA RATON, FL 334313809 US

## New Mailing Address:

2621 NO FEDERAL HWY  
T  
BOCA RATON, FL 334313809 US

FEI Number: 59-2306356

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLOUSE, DEVON  
2621 N. FEDERAL HWY, #M  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

CLOUSE, DEVON  
2621 N. FEDERAL HWY, #T  
BOCA RATON, FL 33431 US

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: DEVON CLOUSE

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CLOUSE, DEVON  
Address: 2621 NO. FEDERAL HWY., #M  
City-St-Zip: BOCA RATON, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CLOUSE, DEVON  
Address: 2621 NO. FEDERAL HWY., #T  
City-St-Zip: BOCA RATON, FL

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: DEVON CLOUSE

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date