2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G63741

Entity Name: AMERICAN KITCHEN & BATH CABINETS, INC.

FILED Jan 10, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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5300 SOUTH FLORIDA AVE 225 EAST LEMON STREET

⁻2 351

LAKELAND, FL 33813 US LAKELAND, FL 33801 US

Current Mailing Address: New Mailing Address:

PO BOX 5378 PO BOX 2808

LAKELAND, FL 33807 US LAKELAND, FL 33806 US

FEI Number: 59-2404681 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WENDEL, JOHN F WENDEL, JOHN F

% WENDEL & CHRITTON, CHARTERED
5300 SOUTH FLORIDA AVE., SUITE F1
225 EAST LEMON STREET, SUITE 351

LAKELAND, FL 33813 US LAKELAND, FL 33801 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: 01/10/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 WENDEL, JOHN F,
 Name:
 WENDEL, JOHN F,

 Address:
 5300 SOUTH FLORIDA AVENUE, SUITE F1
 Address:
 225 EAST LEMON STREET

 City-St-Zip:
 LAKELAND, FL 33813
 City-St-Zip:
 LAKELAND, FL 33801

Title: VD () Delete Title: () Change () Addition

 Name:
 WENDEL, ALBERT G
 Name:

 Address:
 6782 S. PINEBRANCH PT.
 Address:

 City-St-Zip:
 HOMOSASSA, FL
 City-St-Zip:

Title: STD () Delete Title: STD (X) Change () Addition

Name:CHRITTON, CHARLES P.,Name:CHRITTON, CHARLES P.,Address:5300 SOUTH FLORIDA AVENUE, SUITE F1Address:225 EAST LEMON STREETCity-St-Zip:LAKELAND, FL 33813City-St-Zip:LAKELAND, FL 33801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: /S/ JOHN F. WENDEL PD 01/10/2005