## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G63741

Entity Name: AMERICAN KITCHEN & BATH CABINETS, INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

225 EAST LEMON STREET 336 WEST HIGHLAND DRIVE 351 LAKELAND, FL 33813 US

LAKELAND, FL 33801 US

Current Mailing Address: New Mailing Address:

PO BOX 2808 336 WEST HIGHLAND DRIVE LAKELAND, FL 33806 US LAKELAND, FL 33813 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 & CHRITTON, CHARTERED 225 EAST LEMON STREET, SUITE 351

225 EAST LEMON STREET, SUITE 35 LAKELAND, FL 33801 US

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WENDEL, JOHN F 336 WEST HIGHLAND DRIVE LAKELAND, FL 33813 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: JOHN F. WENDEL 04/26/2007

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: 235 FAST LEMON STREET Address: 336 WEST HIGHLAND DRIVE

 Address:
 225 EAST LEMON STREET
 Address:
 336 WEST HIGHLAND DRIVE

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

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

Name: WENDEL, ALBERT G Name: WENDEL, ALBERT G

Address: 6782 S. PINEBRANCH PT. Address: 5150 SOUTH FLORIDA AVENUE

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

Title: STD () Delete Title: STD (X) Change () Addition Name: CHRITTON, CHARLES P., Name: CHRITTON, CHARLES P

Name:CHRITTON, CHARLES P.,Name:CHRITTON, CHARLES P.Address:225 EAST LEMON STREETAddress:225 EAST LEMON STREETCity-St-Zip:LAKELAND, FL 33801City-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 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: JOHN F. WENDEL PD 04/26/2007