

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90194 034 ***150.00

DOCUMENT # H71254

1. Entity Name
BOZEMAN CABINET SHOP, INC.



Principal Place of Business
**3009 EAST COURT
PANAMA CITY, FL 32401**

Mailing Address
**PO BOX 35723
PANAMA CITY, FL 32412**

40001011



02052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2589664

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RAY, KENNETH L.
3009 EAST 3RD COURT
PANAMA CITY, FL 32401**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RAY, KENNETH L.
STREET ADDRESS	1714 FOSTER AVE.
CITY-ST-ZIP	PANAMA CITY, FL
TITLE	VT
NAME	RAY, JAMES K
STREET ADDRESS	1714 FOSTER AVE
CITY-ST-ZIP	PANAMA CITY, FL
TITLE	S
NAME	RAY, JO ANN
STREET ADDRESS	1714 FOSTER AVE
CITY-ST-ZIP	PANAMA CITY, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth L Ray*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/07 **850-763-6792**
Date Daytime Phone #

ATTACHMENT
40081341
Division of Corporations

Annual Report

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Document Number	H71254
Business Entity Name	BOZEMAN CABINET SHOP, INC.
FEI Number	592589664
FEI Number Status	
Certificate of Status Desired	No
Election Campaign Financing Trust Fund Contribution	No

Principal Place of Business

Address	3009 EAST COURT
Suite, Apt. #, etc.	
City, State	PANAMA CITY, FL
Zip Code & Country	32401

Mailing Address

Address	PO BOX 35723
Suite, Apt. #, etc.	
City, State	PANAMA CITY, FL
Zip Code & Country	32412

Name and Address of Registered Agent

RA Business Name	RAY, KENNETH L.
Address	3009 EAST 3RD COURT
Suite, Apt. #, etc.	
City, State	PANAMA CITY, FL
Zip Code & Country	32401 US
Registered Agent Signature	KENNETH L. RAY

Officer/Director Name and Address

Title	P
Entity Name	RAY, KENNETH L.
Street Address	1714 FOSTER AVE.
City, State	PANAMA CITY, FL
Zip Code & Country	

Title	VT
Name (Last, First, Middle, Title)	RAY, JAMES , K
Street Address	1714 FOSTER AVE
City, State	PANAMA CITY, FL
Zip Code & Country	

ATTACHMENT

40081341

71254

Title
Name (Last, First, Middle, Title)
Street Address
City, State
Zip Code & Country

S
RAY, JO ANN
1714 FOSTER AVE
PANAMA CITY, FL

Title
Officer/Director Signature

P
KENNETH L. RAY