UNIFORM BUSINESS REPORT (UBR)

2003 FOR PROFIT CORPORATION

DOCUMENT # 1. Entity Name

J03116

BUILDERS CHOICE CABINETS, INC.





Principal Place of Business Mailing Address 700 EDGE ST. 700 EDGE STREET FT WALTON BEACH FL 32547 FT. WALTON BEACH FL 32547 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-2683310 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HINES, GLENN D. Street Address (P.O. Box Number is Not Acceptable) 700 EDGE ST FT WALTON BEACH FL 32547 City Zip Code 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 \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete Addition TITLE TITLE ☐ Change wells, howard r. NAME NAME 7 LAKE LORRAINE CIRCLE STREET ADDRESS STREET ADDRESS SHALIMAR FL CITY-ST-7IE CITY-ST-ZIP Delete TITLE PD ☐ Change Addition TITLE HINES, GLENN D. NAME NAME 35 7TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP shalimar fl CITY-ST-ZIE TITLE Delete TITLE: ___Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME

12. Thereby certify that the information supplied with this filing does not qualify 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 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.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

8/25/03 850-863-3821 Date Daytime Phone *

Aug 28, 2003 8:00 am Secretary of State

08-28-2003 90068 042 ***150.00



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BUILDERS CHOICE CABINETS, INC.

700 Edge Street, Ft. Walton Beach, FL 32547 Telephone (850) 863-3821 • FAX (850) 864-4509

703116

Division of Corporations Uniform Business Report Filings P O Box 1500 Tallahassee, Fl 32302-1500

RE: 2003 Uniform Business Report

Dear Sirs,

I received notice of our filing for the UBR report today and was surprised when I saw that the filing fee was \$ 550.00 when our normal filing fee is \$150.00. I called Tallahassee to inquire as to why the increase and was informed that we are filing late. I informed Tallahassee that I hadn't received prior notice in regards to the UBR report and was told to send a letter along with the payment of \$150.00 to register our business.

Please except our apologies for filing late but I was unaware that I had done so.

Thank you,

Diane Blizzard Office Manager