

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J64063

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: CUSTOM CRAFTSMEN SERVICES, INC.

## Current Principal Place of Business:

887 NE DIXIE HWY  
#6  
JENSEN BEACH, FL 34957

## New Principal Place of Business:

## Current Mailing Address:

887 NE DIXIE HWY  
#6  
JENSEN BEACH, FL 34957

## New Mailing Address:

FEI Number: 59-2794416      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOEBE, BRUCE A.  
2477 NE DIXIE HIGHWAY  
JENSEN BEACH, FL 34957      US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NORRIS, W.O.  
Address: 1585 N.E. BEACON DRIVE  
City-St-Zip: JENSEN BEACH, FL 34957

Title: VSD ( ) Delete  
Name: MICHAEL, JOSHUA  
Address: 467 SE STREAMLET AVE.  
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: TD ( ) Delete  
Name: NORRIS, JUDITH  
Address: 1585 N.E. BEACON DRIVE  
City-St-Zip: JENSEN BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NORRIS, W.O.  
Address: 140 KIMSEY ST  
City-St-Zip: BALDWIN, GA 30511

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: NORRIS, JUDITH  
Address: 140 KIMSEY ST  
City-St-Zip: BALDWIN, GA 30511

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: JOSHUA MICHAEL

VP

04/27/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date