## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J93140

FILED Apr 21, 2007 Secretary of State

Entity Name: VINTAGE WOODWORKS OF PALM BEACH, INC.

Current Principal Place of Business:			iness:	New Principal Place	New Principal Place of Business:		
2851 SW: BOYNTON	9TH ST. N BEACH, FL	33435	US				
Current Mailing Address:				New Mailing Address	New Mailing Address:		
2851 SW : BOYNTON	9TH ST. N BEACH, FL	33435	US				
FEI Number	: 65-0008374	FEI Nu	ımber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:				Name and Address of	Name and Address of New Registered Agent:		
01101100							
2851 SW	DAVID 9TH ST. NBEACH, FL	33435	US				
2851 SW : BOYNTON	9TH ST. N BEACH, FL			purpose of changing its registere	d office or registered agent, or both,		
2851 SW : BOYNTON	9TH ST. N BEACH, FL named entity e of Florida.			purpose of changing its registere	d office or registered agent, or both,		
2851 SW : BOYNTON The above in the Stat	9TH ST. N BEACH, FL e named entity e of Florida. RE:	submits			d office or registered agent, or both,  Date		
2851 SW BOYNTON  The above in the State  SIGNATU	PTH ST. N BEACH, FL named entity of of Florida. RE: Electro	submits	this statement for the				
2851 SW BOYNTON  The above in the Stat  SIGNATU  Election Ca	PTH ST. N BEACH, FL named entity of of Florida. RE: Electro	submits nic Signa g Trust F	this statement for the	gent			
2851 SW BOYNTON  The above in the Stat  SIGNATU  Election Ca	PTH ST. N BEACH, FL named entity of Florida. RE: Electro mpaign Financin S AND DIREC	submits  nic Signa g Trust F  TORS: ) Delete PHEN,	this statement for the	gent	Date		

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: DAVID SHOURD	VT	04/21/2007
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