2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M99917

Entity Name: TONY'S CABINET'S & TRIM, INC.

FILED Jul 14, 2005 Secretary of State

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

3300 PINE OAKS LANE 133 JONDABOB RD.

MIDDLEBURG, FL 32061 GREEN COVE SPRINGS, FL 32043

Current Mailing Address: New Mailing Address:

3000-3 HARTLEY ROAD 133 JONDABOB RD

JACKSONVILLE, FL 32257 US GREEN COVE SPRINGS, FL 32043 US

FEI Number: 59-2911301 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:

WARDEN, CLYDE A WARDEN, CLYDE A 3300 PINE OAKS LANE 133 JONDABOB RD.

MIDDLEBURG, FL 32061 US GREEN COVE SPRINGS, FL 32043 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: CLYDE A. WARDEN 07/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WARDEN, CLYDE A
 Name:
 WARDEN, CLYDE A

 Address:
 3300 PINE OAKS LANE
 Address:
 133 JONDABOB RD.

City-St-Zip: MIDDLEBURG, FL 32061 City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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

 Name:
 WARDEN, NORA
 Name:
 WARDEN, NORA E

 Address:
 3300 PINE OAKS LANE
 Address:
 133 JONDABOB RD.

City-St-Zip: MIDDLEBURG, FL 32061 City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NORA E. WARDEN ST 07/14/2005