

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000008446

**FILED**  
**Jan 18, 2010**  
**Secretary of State**

**Entity Name:** THE CARPENTER'S WORKSHOP OF CRESTVIEW, INC.

**Current Principal Place of Business:**

541 NORTHERN DANCER DRIVE  
CRESTVIEW, FL 32539

**New Principal Place of Business:**

**Current Mailing Address:**

541 NORTHERN DANCER DRIVE  
CRESTVIEW, FL 32539

**New Mailing Address:**

**FEI Number:** 20-1676859

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LARSON, CLIFFORD F REV.  
541 NORTHERN DANCER DRIVE  
CRESTVIEW, FL FL 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** LARSON, CLIFFORD F REV  
**Address:** 541 NORTHERN DANCER DRIVE  
**City-St-Zip:** CRESTVIEW, FL 32539 US

**Title:** SEC  
**Name:** PERRY, FRANKLIN D  
**Address:** 8204 LAWSON LANE  
**City-St-Zip:** BAKER, FL 32531 US

**Title:** TRES  
**Name:** ATKINSON, LESLIE E JR  
**Address:** 5782 SEMINOLE DRIVE  
**City-St-Zip:** CRESTVIEW, FL 32536 US

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** LESLIE E ATKINSON JR

TRES

01/18/2010

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

\_\_\_\_\_  
Date