

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000009158

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: IT'S TRUE CABINETRY AND INSTALLATION, INC.

## Current Principal Place of Business:

11330 NW 15TH CT.  
PEMBROKE PINES, FL 33026

## New Principal Place of Business:

35250 DENNIS ROAD  
LEESBURG, FL 34788

## Current Mailing Address:

11330 NW 15TH CT.  
PEMBROKE PINES, FL 33026

## New Mailing Address:

11100 LINKSIDE DRIVE  
PORT RICHEY, FL 34668

FEI Number: 65-1077483

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GONZALES, JEFF  
11330 NW 15TH CT.  
PEMBROKE PINES, FL 33026 US

## Name and Address of New Registered Agent:

GONZALES, JEFF  
35250 DENNIS ROAD  
LEESBURG, FL 34788 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: JEFF GONZALES

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GONZALES, JEFF  
Address: 11330 NW 15TH CT.  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: GONZALES, JEFF  
Address: 35250 DENNIS ROAD  
City-St-Zip: LEESBURG, FL 34788

Title: VP ( ) Change (X) Addition  
Name: SWANK, BEVERLY  
Address: 35250 DENNIS ROAD  
City-St-Zip: LEESBURG, FL 34788

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: BEVERLY SWANK

VP

02/24/2009

Electronic Signature of Signing Officer or Director

Date