

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000030427

FILED  
Mar 06, 2005  
Secretary of State

Entity Name: QUALITY CABINETS & COUNTERS, INC.

## Current Principal Place of Business:

28630 NORTH DIESEL DRIVE  
SUITE 1  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

## Current Mailing Address:

28630 NORTH DIESEL DRIVE  
SUITE 1  
BONITA SPRINGS, FL 34135

## New Mailing Address:

FEI Number: 65-1090572

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REYNOLDS, MARY  
17241 TRAPPERS DR  
FT MYERS, FL 33912 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: ST ( ) Delete  
Name: REYNOLDS, MARY  
Address: 17241 TRAPPERS DR  
City-St-Zip: FT MYERS, FL 33912

Title: VP ( ) Delete  
Name: REYNOLDS, JOHN  
Address: 17241 TRAPPERS DRIVE  
City-St-Zip: FORT MYERS, FL 33912

Title: P ( ) Delete  
Name: BRUNCO, JAMES A  
Address: 17241 MEADOW LAKE CIRCLE  
City-St-Zip: FORT MYERS, FL 33912

Title: VP ( ) Delete  
Name: BRUNCO, SUE ELLEN  
Address: 17241 TRAPPERS DRIVE  
City-St-Zip: FORT MYERS, FL 33912

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MARY REYNOLDS

ST

03/06/2005

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

\_\_\_\_\_  
Date