

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000026874

FILED
Jun 03, 2009
Secretary of State

Entity Name: TOP SHELF CLOSETS AND HOME OFFICES, INC.

Current Principal Place of Business:

400 B DOUGLAS ROAD
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

11309 CYPRESS RESERVE DRIVE
TAMPA, FL 33626

New Mailing Address:

3158 SHINE LANE
SPRING HILL, FL 34607

FEI Number: 04-3659104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWERFIND, STEVEN P
11309 CYPRESS RESERVE DRIVE
TAMPA, FL 33626 US

Name and Address of New Registered Agent:

BOWERFIND, STEVEN P
3158 SHINE LANE
SPRING HILL, FL 34607 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: STEVEN P BOWERFIND

06/03/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: BOWERFIND, STEVEN P
Address: 11309 CYPRESS RESERVE DRIVE
City-St-Zip: TAMPA, FL 33626

Title: DVS () Delete
Name: BOWERFIND, KELLI J
Address: 11309 CYPRESS RESERVE DRIVE
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: BOWERFIND, STEVEN P
Address: 3158 SHINE LANE
City-St-Zip: SPRING HILL, FL 34607

Title: DVS (X) Change () Addition
Name: BOWERFIND, KELLI J
Address: 3158 SHINE LANE
City-St-Zip: SPRING HILL, FL 34607

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: KELLI J BOWERFIN

DVS

06/03/2009

Electronic Signature of Signing Officer or Director

Date