

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103042

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: CREATIVE DESIGN & FINE CABINETRY, INC.

## Current Principal Place of Business:

1555 DETRICK AVENUE  
DELAND, FL 32724

## New Principal Place of Business:

## Current Mailing Address:

1555 DETRICK AVENUE  
DELAND, FL 32724

## New Mailing Address:

FEI Number: 54-2127923

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KANE-CALDWELL, CANDACE  
1555 DETRICK AVENUE  
DELAND, FL 32724 US

## Name and Address of New Registered Agent:

LEE, STEPHANIE T  
1555 DETRICK AVENUE  
DELAND, FL 32724 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: STEPHANIE T. LEE

03/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SURPHLIS, RICHARD M  
Address: 1555 DETRICK AVENUE  
City-St-Zip: DELAND, FL 32724

Title: V ( ) Delete  
Name: SIMONEAU, PETER M  
Address: 1555 DETRICK AVENUE  
City-St-Zip: DELAND, FL 32724

Title: T ( ) Delete  
Name: KANE-CALDWELL, CANDACE  
Address: 2492 W PARK ROAD  
City-St-Zip: DELAND, FL 32724

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition  
Name: LEE, STEPHANIE T  
Address: 1555 DETRICK AVE  
City-St-Zip: DELAND, FL 32724

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: STEPHANIE T. LEE

T

03/26/2009

Electronic Signature of Signing Officer or Director

Date