

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000117631

Entity Name: THEE CABINET SHOP, INC.

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4994 TROTT CIRCLE  
17  
NORTH PORT, FL 34287 US

**New Principal Place of Business:**

**Current Mailing Address:**

4994 TROTT CIRCLE  
17  
NORTH PORT, FL 34287 US

**New Mailing Address:**

FEI Number: 20-0317737

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARMENTROUT, TERRY  
170 W. DEARBORN STREET  
ENGLEWOOD, FL 34223 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: KEARNEY, GARY  
Address: 1315 TINAMOU ROAD  
City-St-Zip: VENICE, FL 34293 US

Title: VP  
Name: SAMS, SCOTT  
Address: 4312 ULMAN AVENUE  
City-St-Zip: NORTH PORT, FL 34286 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY O. KEARNEY

PRES

04/15/2011

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

\_\_\_\_\_  
Date