

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000148006

Entity Name: ST JOHNS CARPENTRY, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

2435 DOBBS ROAD
SUITE C
ST AUGUSTINE, FL 32086

New Principal Place of Business:

360 SHAMROCK ROAD
ST AUGUSTINE, FL 32086

Current Mailing Address:

2435 DOBBS ROAD
SUITE C
ST AUGUSTINE, FL 32086

New Mailing Address:

360 SHAMROCK ROAD
ST AUGUSTINE, FL 32086

FEI Number: 20-0788433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PTD () Delete
Name: CHAPMAN, DAVID B
Address: 360 SHAMROCK RD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: VSD () Delete
Name: CHAPMAN, LIANA D
Address: 360 SHAMROCK RD
City-St-Zip: ST AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LIANA D. CHAPMAN

VSD

04/28/2008

Electronic Signature of Signing Officer or Director

Date