

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000023431

FILED
Sep 29, 2005
Secretary of State

Entity Name: OCALA WHOLESALE CABINETS AND INSTALLATION COMPANY

Current Principal Place of Business:

17385 SW 38 AVE RD
OCALA, FL 34473

New Principal Place of Business:

Current Mailing Address:

17385 SW 38 AVE RD
OCALA, FL 34473

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FISCHER, GARY R
17385 SW 38 AVE RD
OCALA, FL 34473 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: PS () Delete
Name: FISCHER, GARY R
Address: 17385 SW 38 AVE RD
City-St-Zip: OCALA, FL 34473

Title: D () Delete
Name: RUGG, DOUGLAS W
Address: P.O. BOX 5136
City-St-Zip: SALT SPRINGS, FL 32134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D () Change (X) Addition
Name: RUGG, KELLY L
Address: P.O. BOX 5136
City-St-Zip: SALT SPRINGS, FL 32134

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: GARY R. FISCHER

PS

09/29/2005

Electronic Signature of Signing Officer or Director

Date