

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046832

FILED
Apr 13, 2005
Secretary of State

Entity Name: GULF COAST OF FL. CABINETS INC.

Current Principal Place of Business:

13517 CITRUS WAY
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

13517 CITRUS WAY
BROOKSVILLE, FL 34601

New Mailing Address:

FEI Number: 65-1216392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SESSIONS, TERRY
13517 CITRUS WAY
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

SESSIONS, FRANK
13517 CITRUS WAY
BROOKSVILLE, FL 34601 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: FRANK SESSIONS

04/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SESSIONS, FRANK
Address: 13517 CITRUS WAY
City-St-Zip: BROOKSVILLE, FL 34601

Title: VT () Delete
Name: SESSIONS, TERRY
Address: 13517 CITRUS WAY
City-St-Zip: BROOKSVILLE, FL 34601

Title: S () Delete
Name: SESSIONS, RACHAEL
Address: 13517 CITRUS WAY
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: EXUM, SCOTT R
Address: 13517 CITRUS WAY
City-St-Zip: BROOKSVILLE, FL 34601

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

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: FRANK SESSIONS

P

04/13/2005

Electronic Signature of Signing Officer or Director

Date