## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000122646

City-St-Zip:

JACKSONVILLE, FL 32246

Entity Name: ARCHITECTURAL MILLWORK, INC.

FILED Mar 11, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2431 ST. JOHNS BLUFF ROAD BLDG. 113 JACKSONVILLE, FL 32246				14476 DUVAL PLACE W BLDG. 703 JACKSONVILLE, FL 32218		
Current Mailing Address:				New Mailing Address:		
2431 ST. JOHNS BLUFF ROAD BLDG. 113 JACKSONVILLE, FL 32246				14476 DUVAL PLACE W BLDG. 703 JACKSONVILLE, FL 32218		
FEI Number:	: 80-0118675	FEI Number Applied For ( )	FEI Nur	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
3150 SANI	RATE USA, IN DY RIDGE DR ATER, FL 337					
	e named entity e of Florida.	submits this statement for the	purpose o	f changing its registere	d office or registered agent, or both,	
SIGNATU	RE:					
Electronic Signature of Registered Agent					Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( REED, WILLIA 1075 EAGLE E JACKSONVILL	SEND COURT		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S, T ( REED, DONNA 1075 EAGLE E JACKSONVILL	SEND COURT		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	REED, BOB	) Delete NS BLUFF ROAD, #113		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: BOB REED VP 03/11/2008