

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000038480

**FILED**  
**Jan 24, 2011**  
**Secretary of State**

**Entity Name:** CUSTOM CABINETS BY DAVID BOLTON, INC.

**Current Principal Place of Business:**

3220 NE 51ST AVENUE  
HIGH SPRINGS, FL 32643

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 953  
NEWBERRY, FL 32669

**New Mailing Address:**

**FEI Number:** 26-4782466

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOLTON, DAVID  
3220 NE 51ST AVENUE  
HIGH SPRINGS, FL 32643 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: OWNE  
Name: BOLTON, DAVID E  
Address: 3220 NE 51ST AVE  
City-St-Zip: HIGH SPRINGS, FL 32643

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: DAVID BOLTON

OWNE

01/24/2011

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

\_\_\_\_\_  
Date