

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000076949

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** CABINET WORKS PLUS, INC.

**Current Principal Place of Business:**

2271 CR.528  
SUMTERVILLE, FL 33585 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 37  
SUMTERVILLE, FL 33585 US

**New Mailing Address:**

**FEI Number:** 45-2952517      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CHURCHILL, JASON K  
2271 CR.528  
SUMTERVILLE, FL 33585 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: P  
Name: CHURCHILL, JASON K  
Address: PO BOX 37  
City-St-Zip: SUMTERVILLE, FL 33585 US

Title: VP  
Name: ROBERTSON, MICHELLE D  
Address: PO BOX 491008  
City-St-Zip: LEESBURG, FL 34748 US

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: JASON CHURCHILL

PRES

04/29/2012

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

\_\_\_\_\_  
Date