## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



Secretary of State DIVISION OF CORPORATIONS

## P94000012632 (3) DOCUMENT #

CUSTOM FINISHED CARPENTRY, INC.

## **FILED** Apr 27 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address			
11414 DUNN		11414 DUNN CREEK RD.				
JACKSONVILLE FL 32218		JACKSONVILLE FL 32218			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					02/11/1994	
2 Principal P	lace of Business	2a. Mailing Address	•		4. FEI Number Applied For	
			,,,,		<b>59-3222714</b> Not Applicable	
Suite, Apt.	Suite, Apt. #, etc.	ot. #. etc.		— \$9.75 Additional		
22 27		<b>⊢</b>			5. Certificate of Status Desired Fee Required	
City & State City & State			Election Campaign Financing \$5.00 May Be			
23					Trust Fund Contribution	
Zip	Country	Zip	<u> </u>		8. This corporation owes or has paid the current year Intangible	
24 25 29 30			30		Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
DERAY, RICHARD 81 Name						
11414 DUNN CREEK RD. JACKSONVILLE FL 32218				Street A	Address (P.O. Box Number is Not Acceptable)	
MUNDOMAILLE PL 32218			83	<del> </del>		
			84	City	85 Zip Code	
				"	FL [**]	
11. Pursuant	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
office of registered agent, or both, in the state of honds such change was authorized by the corporation's board of offectors. Thereby accept the appointment as registered agent, or both, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
GIGHATORE	Signature, typed or printed name of registered a		Registered Ag	ent signature i	required when reinstating) DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	DERAY, RICHARD		1.2 NAME			
STREET ADDRESS	11414 DUNN CREEK RD.		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32218		1.4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition	
NAME			22 NAME			
STREET ADDRESS	ss		2.3 STREET	T ADDRESS		
CITY-ST-ZIP			2.4 CITY-	ST-ZIP		
TITLE	DELETE 3.1 T		3.1 TIFLE	i	☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	•	
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	ADDRESS		
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-:	F		
TITLE		DELETE	6.1 TITLE	<del></del>	Change Addition	
NAME			6.2 NAME		_ · · ·	
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			6.4 CITY-			
	certify that the information supplied	with this filing does not qualify for			d in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
indicated	on this annual report of supplemen	stel ennual report is true and eccu	rate and th	at my eign	nature shall have the same legal effect as if made under oath: that I am an	

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a 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 in Block 12 or Block 13 if changed, or on an attachment with an address.