

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000000550

**FILED**  
**Jan 18, 2010**  
**Secretary of State**

**Entity Name:** ANTHONY'S CABINETS & WOODWORKS, INC.

**Current Principal Place of Business:**

6554-44TH ST.  
1008  
PINELLAS PARK, FL 33781 US

**New Principal Place of Business:**

**Current Mailing Address:**

5080 91ST AVE N  
PINELLAS PARK, FL 33782

**New Mailing Address:**

6554-44TH ST.  
1008  
PINELLAS PARK, FL 33781 US

**FEI Number:** 59-3284213      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SPENCER, JAMES D  
5821 MONROE ST  
NEW PORT RICHEY, FL 34653 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CASTORINA, ANTHONY  
**Address:** 5080 91 AVE  
**City-St-Zip:** PINELLAS PARK, FL 33782 US

**Title:** VP  
**Name:** CASTORINA, DEVIN VP  
**Address:** 5080 91 AVE  
**City-St-Zip:** PINELLAS PARK, FL 33782 US

**Title:** VP  
**Name:** MITCHELL, RICHARD VP  
**Address:** 6554-44TH ST  
**City-St-Zip:** PINELLAS PARK, FL 33781 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: ANTHONY CASTORINA

PRES

01/18/2010

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

\_\_\_\_\_ Date