2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005
Secretary of State

DOCUMENT# P95000038576

Entity Name: CABINET CRAFT OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

235 STATE RD. 207 UNIT 3A
ST AUGUSTINE, FL 32095 US

New Principal Place of Business:

235 STATE RD. 207 UNIT 3A
ST AUGUSTINE, FL 32084 US

Current Mailing Address:

235 STATE RD. 207 UNIT 3A
ST AUGUSTINE, FL 32095 US

New Mailing Address:

235 STATE RD. 207 UNIT 3A
ST AUGUSTINE, FL 32084 US

FEI Number: 59-3312803 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONOGHAN, R.M.
235 STATE RD 207 #3A
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

MONAGHAN, R.M.
235 STATE RD 207 #3A
SAINT AUGUSTINE, FL 32084 US

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: R. M. MONAGHAN 04/15/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: COLVERT, JAMES W JR
Address: 235 STATE RD 207
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: ST ( ) Delete
Name: MONAGHAN, R.M.
Address: 235 STATE RD. 207 UNIT 3A
City-St-Zip: ST AUGUSTINE, FL 32095 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change ( ) Addition
Name: MONAGHAN, R.M.
Address: 235 STATE RD. 207 UNIT 3A
City-St-Zip: ST AUGUSTINE, FL 32084 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: R. M. MONAGHAN ST 04/15/2005
Electronic Signature of Signing Officer or Director Date