

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000059382

FILED  
Jan 27, 2004  
Secretary of State

**Entity Name:** SPECIALTY CABINETS AND MILLWORKS, INC.

**Current Principal Place of Business:**

2702-2 POWER MILL COURT  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 12668  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** 59-3322516

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PALMER, RILEY D  
2678 OLD LLOYD ROAD  
MONTICELLO, FL 32344 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: PVP ( ) Delete  
Name: PALMER, RILEY D  
Address: 2678 OLD LLOYD ROAD  
City-St-Zip: MONTICELLO, FL 32344

Title: TS ( ) Delete  
Name: MARTIN, JUNE R  
Address: 4220 SHORTSWOOD ROAD  
City-St-Zip: TALLAHASSEE, FL 32303

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ROBINSON, DONNELL  
Address: P. O. BOX 372  
City-St-Zip: WACISSA, FL 32361

Title: VP (X) Change ( ) Addition  
Name: PALMER, RILEY D  
Address: 2678 OLD LLOYD ROAD  
City-St-Zip: MONTICELLO, FL 32344

Title: ST ( ) Change (X) Addition  
Name: PALMER, DIANE G  
Address: 2678 OLD LLOYD ROAD  
City-St-Zip: MONTICELLO, FL 32344

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:** DIANE G. PALMER

ST

01/27/2004

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

\_\_\_\_\_  
Date