

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000009164

FILED
Feb 20, 2009
Secretary of State

Entity Name: COMPLETE CABINET CONCEPTS, INC.

Current Principal Place of Business:

1876 LAKE AVENUE SE
UNIT F & G
LARGO, FL 33771 US

New Principal Place of Business:

1954 LAKE AVENUE SE
LARGO, FL 33771 US

Current Mailing Address:

1876 LAKE AVENUE SE
UNIT F & G
LARGO, FL 33771 US

New Mailing Address:

1954 LAKE AVENUE SE
LARGO, FL 33771 US

FEI Number: 65-0636951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEISICKLE, LISA W
1876 LAKE AVENUE SE
UNIT F & G
LARGO, FL 337713799 US

Name and Address of New Registered Agent:

WEISICKLE, LISA W
1954 LAKE AVENUE SE
LARGO, FL 337713799 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: LISA W WEISICKLE

02/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WEISICKLE, DAVID E
Address: 1344 STRATFORD DRIVE
City-St-Zip: CLEARWATER, FL 33756

Title: STD () Delete
Name: WEISICKLE, LISA W
Address: 1344 STRATFORD DRIVE
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LISA W WEISICKLE

STD

02/20/2009

Electronic Signature of Signing Officer or Director

Date