

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000040329

FILED
Jan 30, 2006
Secretary of State

Entity Name: KEITH'S CARPENTRY, CABINETS, AND SUPPLIES, INC.

Current Principal Place of Business:

303 COMMERCE COURT
WINTER HAVEN, FL 33880

New Principal Place of Business:

700 HIGHWAY 17, SOUTH
EAGLE LAKE, FL 33839

Current Mailing Address:

303 COMMERCE COURT
WINTER HAVEN, FL 33880

New Mailing Address:

P. O. BOX 1409
EAGLE LAKE, FL 33839

FEI Number: 59-3384238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SLOVER, WENDALL K
303 COMMERCE COURT
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

SLOVER, WENDALL K
700 HIGHWAY 17, SOUTH
EAGLE LAKE, FL 33839 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: WENDALL K. SLOVER

01/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SLOVER, WENDALL K
Address: 303 COMMERCE COURT
City-St-Zip: WINTER HAVEN, FL 33880

Title: VP () Delete
Name: SLOVER, DEBRA P
Address: 303 COMMERCE COURT
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SLOVER, WENDALL K
Address: 700 HIGHWAY 17, SOUTH
City-St-Zip: EAGLE LAKE, FL 33839

Title: VP (X) Change () Addition
Name: SLOVER, DEBRA P
Address: 700 HIGHWAY 17, SOUTH
City-St-Zip: EAGLE LAKE, FL 33839

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBRA P. SLOVER

VP

01/30/2006

Electronic Signature of Signing Officer or Director

Date