2008 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 18, 2008 08:00 AN DOCUMENT # P96000072042 **Secretary of State** 1. Entity Name RIDDICK CABINET DOOR, INC. Principal Place of Business Mailing Address 5146 SE STATE ROAD 100 P. O. BOX 456 STARKE, FL 32091 US STARKE, FL 32091 US 01112008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3400105 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HARDY, DUDLEY P DO NOT WRITE 998 NO TEMPLE AVENUE STARKE, FL 32091 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signsture, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOWII! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE RIDDICK, DANIEL L NAME STREET ADDRESS 10096 SW 69TH ST CITY-ST-ZIP HAMPTON, FL 32044 TITI F U00000830745 02/26/08-80097-002 150.00 RIDDICK, SHERYL L NAME STREET ADDRESS 10098 SW 69TH ST CITY-ST-2(P HAMPTON, FL 32044 TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

Shery Likiddick Hizlo

352-473-703

FILED

Daytime Phone #