2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000027032

Entity Name: THE WOODWORKER'S CABINET, INC.

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of 6189 TAYLOR RD. UNIT #2 NAPLES, FL 34109 US Current Mailing Address: New Mailing Address:	Business: Certificate of Status Desired (X)
UNIT #2 NAPLES, FL 34109 US Current Mailing Address: 6189 TAYLOR RD. UNIT #2 NAPLES, FL 34109 US FEI Number: 59-3439549 FEI Number Applied For () FEI Number Not Applicable () Name and Address of Current Registered Agent: Name and Address of Name Name and Address of Name Name Name Name Name Name Name Name	Certificate of Status Desired (X)
Current Mailing Address: 6189 TAYLOR RD. UNIT #2 NAPLES, FL 34109 US FEI Number: 59-3439549 FEI Number Applied For () FEI Number Not Applicable () Name and Address of Current Registered Agent: Name and Address of Name and Name an	Certificate of Status Desired (X)
6189 TAYLOR RD. UNIT #2 NAPLES, FL 34109 US FEI Number: 59-3439549 FEI Number Applied For () FEI Number Not Applicable () Name and Address of Current Registered Agent: Name and Address of N FUSCO, GARY	Certificate of Status Desired (X)
UNIT #2 NAPLES, FL 34109 US FEI Number: 59-3439549 FEI Number Applied For () FEI Number Not Applicable () Name and Address of Current Registered Agent: Name and Address of N FUSCO, GARY	Certificate of Status Desired (X)
FEI Number: 59-3439549 FEI Number Applied For () FEI Number Not Applicable () Name and Address of Current Registered Agent: Name and Address of N FUSCO, GARY	Certificate of Status Desired (X)
Name and Address of Current Registered Agent: Name and Address of Name and Address of N	Certificate of Status Desired (X)
FUSCO, GARY	
	ew Registered Agent:
6570 ILEX CIRCLE NAPLES, FL 34109 US	
The above named entity submits this statement for the purpose of changing its registered o in the State of Florida.	ffice or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS
Title: P () Delete Title: () Name: FUSCO, GARY Name: Address: 6570 ILEX CIRCLE Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip:	Change () Addition
Title: VP () Delete Title: () Name: FUSCO, DANIEL F Name: Address: 1619 TRIANGLE PALM TERRACE Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip:	Change () Addition
Name: Name: PALMATEER, S	Change (X) Addition COTT E RIVE 1110

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: DANIEL F. FUSCO VP 02/11/2009