

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000108208

FILED  
Feb 21, 2003  
Secretary of State

**Entity Name:** DISTINCTIVE CABINET DESIGNS, INC.

**Current Principal Place of Business:**

5556 YAHL ST. STE. A  
NAPLES, FL 341091936

**New Principal Place of Business:**

**Current Mailing Address:**

5556 YAHL ST. STE. A  
NAPLES, FL 341091936

**New Mailing Address:**

**FEI Number:** 59-3485057

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEWART, JAMES C JR.  
2121 COUNTY ROAD 951 STE. 101  
GOLDEN GATE, FL 341166543 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: PTD ( ) Delete  
Name: BOYCE, RENEE K  
Address: 5556 YAHL ST. STE. A  
City-St-Zip: NAPLES, FL 341091936

Title: V/D ( ) Delete  
Name: BOYCE, TIMOTHY W  
Address: 5556 YAHL ST. STE. A  
City-St-Zip: NAPLES, FL 341091936

Title: S (X) Delete  
Name: RYAN, PHYLLIS M  
Address: 5556 YAHL ST. STE A  
City-St-Zip: NAPLES, FL 341091936

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

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

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 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:** RENEE K. BOYCE

PRES

02/21/2003

Electronic Signature of Signing Officer or Director

Date