


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000027635
 1. Entity Name
D. FANCHER CUSTOM CABINETS, INC.



Principal Place of Business Mailing Address
6767 HAINES RD., UNIT C&D **6767 HAINES RD., UNIT C&D**
ST. PETERSBURG, FL 33702 **ST. PETERSBURG, FL 33702**

DO NOT WRITE IN THIS SPACE



01152006 No Chg-F CR2E034 (11/05)

4. FEI Number 59-3569786	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent
FANCHER, DOUG
6767 HAINES RD., UNIT C&D
ST. PETERSBURG, FL 33702

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6. 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FANCHER, DOUG 6767 HAINES RD., UNIT C&D ST. PETERSBURG, FL 33702
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FANCHER, RYAN 6767 HAINES RD., UNIT C&D ST. PETERSBURG, FL 33702
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DECELLE, CAROLE 8787 HAINES RD., UNIT C&D ST. PETERSBURG, FL 33702
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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:  **DOUG FANCHER** 13-20-06 727-526-5766
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT Date Daytime Phone #