

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 28, 2005 8:00 am**  
**Secretary of State**

02-28-2005 90222 026 \*\*\*150.00

**DOCUMENT # S47036**

1. Entity Name

CLOSET DIMENSIONS, INC.



Principal Place of Business

15832 118TH TERRACE NORTH  
JUPITER FL 33478

Mailing Address

15832 118TH TERRACE NORTH  
JUPITER FL 33478

30019974

2. Principal Place of Business

18048 134TH WAY NORTH

3. Mailing Address

18048 134TH WAY NORTH

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
JUPITER FL

City & State  
JUPITER FL

4. FEI Number

65-0248659

Applied For

Not Applicable

Zip  
33478-3606

Country  
USA

Zip  
33478-3606

Country  
USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E034 (10/04)



6. Name and Address of Current Registered Agent

KOHLER, RENEE C.  
15832 118TH TERRACE NORTH  
JUPITER FL 33478

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)  
18048 134TH WAY NORTH

City  
JUPITER

FL

Zip Code  
33478

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.

SIGNATURE

*Renée C. Kohler*

*V-President*

*2/7/05*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing

Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME KOHLER, JAMES A  
STREET ADDRESS 15832 118TH TERRACE N.  
CITY-ST-ZIP JUPITER FL

TITLE V ☐ Delete  
NAME KOHLER, RENEE C  
STREET ADDRESS 15832 118TH TERR N  
CITY-ST-ZIP JUPITER FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 18048 134TH WAY NORTH  
CITY-ST-ZIP JUPITER FL 33478-3606

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 18048 134TH WAY NORTH  
CITY-ST-ZIP JUPITER FL 33478-3606

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

*Renée C. Kohler* *V-President*

*2-7-05* *561-744-6326*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #