## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000060731

Entity Name: MASTERPIECE CABINETRY, INC.

Current Principal Place of Business:

MASTERPICE CABINETRY INC 686 S. YONGE STREET ORMOND BEACH, FL 32174

**Current Mailing Address:** 

MASTERPICE CABINETRY INC 686 S YONGE ST ORMOND BEACH, FL 32174 US

FEI Number: 59-3746061 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VOLINSKY, ROBERT J 200 GREENBRIAR AVENUE ORMOND BEACH, FL 32174 US

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

FILED Feb 13, 2014

**Secretary of State** 

CC9641340268

## Officer/Director Detail:

Title PD Title VPD

NameVOLINSKY, ROBERT JNameDUBOIS, WAYNE TAddress200 GREENBRIAR AVEAddress2757 AUTUMN LEAVESCity-State-Zip:ORMOND BEACH FL 32174City-State-Zip:PORT ORANGE FL 32128

Title SD Title TD

NameKELLY, VOLINSKY CNameVOLINSKY, KELLY CAddress200 GREENBRIAR AVEAddress200 GREENBRIAR AVECity-State-Zip:ORMOND BEACH FL 32174City-State-Zip:ORMOND BEACH FL 32174

I hereby 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 all other like empowered.

SIGNATURE: ROBERT J VOLINSKY

**PRESIDENT** 

02/13/2014