

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000086594

Entity Name: CABINET DESIGNS OF CENTRAL FLORIDA, INC**Current Principal Place of Business:**596 INTERNATIONAL PLACE
ROCKLEDGE, FL 32955**Current Mailing Address:**596 INTERNATIONAL PLACE
ROCKLEDGE, FL 32955**FEI Number: 27-1202301****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCOTT, DANIEL T
3421 BRAHMAN AVE
ROCKLEDGE, FL 32955 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**Officer/Director Detail :**Title P
Name SCOTT, DANIEL T
Address 3421 BRAHMAN AVE.
City-State-Zip: ROCKLEDGE FL 32955Title T
Name SCOTT, SHERRY
Address 3421 BRAHMAN AVE.
City-State-Zip: ROCKLEDGE FL 32955Title S
Name RILEY, LESLIE
Address 1217 WINDING MEADOWS WAY
City-State-Zip: ROCKLEDGE FL 32955Title VP
Name WHITTEN, DEREK
Address 860 GARDENER RD
City-State-Zip: ROCKLEDGE FL 32955Title VP
Name RILEY, SCOTT D
Address 1217 WINDING MEADOWS RD.
City-State-Zip: ROCKLEDGE FL 32955

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: SHERRY SCOTT**TREAS****03/03/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date