

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000071536

**Entity Name:** BILL SMITH CABINETS INC.

**Current Principal Place of Business:**

366 CYPRESS WAY WEST  
NAPLES, FL 34110

**Current Mailing Address:**

366 CYPRESS WAY WEST  
NAPLES, FL 34110 US

**FEI Number:** 30-0652380

**Certificate of Status Desired:** No

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

SMITH, WILLIAM CIII  
366 CYPRESS WAY WEST  
NAPLES, FL 34110 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 SMITH, WILLIAM CIII  
Address 512 105TH AVE. N  
City-State-Zip: NAPLES FL 34108

Title VICE PRESIDENT  
Name MOCARSKI, DONALD  
Address 3528 ISLAND WALK CIRCLE  
City-State-Zip: NAPLES FL 34119

*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:** WILLIAM C. SMITH

**PRESIDENT**

**04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date