

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001477

**FILED**  
**Apr 18, 2005**  
**Secretary of State**

**Entity Name:** RACCOON ISLAND CABINET COMPANY

**Current Principal Place of Business:**

7248 173RD PLACE  
LIVE OAK, FL 32060

**New Principal Place of Business:**

**Current Mailing Address:**

7248 173RD PLACE  
LIVE OAK, FL 32060

**New Mailing Address:**

**FEI Number:** 59-3618214

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITMER, ROBERT W JR  
7248 173RD PLACE  
POMPANO BEACH, FL 33060 US

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

WHITMER, ROBERT W JR  
7248 173RD PLACE  
LIVE OAK, FL 32060 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: ROBERT W WHITMER, JR.

04/18/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WHITMER, ROBERT W  
Address: 7248 173RD PLACE  
City-St-Zip: LIVE OAK, FL 33060

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WHITMER, ROBERT W  
Address: 7248 173RD PLACE  
City-St-Zip: LIVE OAK, FL 32060

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT W WHITMER, JR

PRES

04/18/2005

Electronic Signature of Signing Officer or Director

Date