

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000081416

FILED  
Apr 04, 2008  
Secretary of State

Entity Name: CABINETREE GARAGE STORAGE SOLUTIONS, INC.

**Current Principal Place of Business:**

1116 BICHARA BLVD  
THE VILLAGES, FL 32159

**New Principal Place of Business:**

2315 HWY27/441  
FRUITLAND PARK, FL 34731

**Current Mailing Address:**

1116 BICHARA BLVD  
THE VILLAGES, FL 32159

**New Mailing Address:**

2315 HWY27/441  
FRUITLAND PARK, FL 34731

FEI Number: 72-1600749

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAMPTON, DOUGLAS  
12520 FADE DR.  
GRAND ISLAND, FL 32735 US

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

SCHWARTZ, DAVID  
218 MALAUKA RAD  
OCKLAWAHA, FL 32179 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: DAVID L SCHWARTZ

04/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DT (X) Delete  
Name: HAMPTON, DOUGLAS  
Address: 12520 FADE DR.  
City-St-Zip: GRAND ISLAND, FL 32735

Title: PD ( ) Delete  
Name: SCHWARTZ, DAVID L  
Address: 1116 BICHARA BLVD  
City-St-Zip: THE VILLAGES, FL 32159

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: SCHWARTZ, DAVID L  
Address: 218 MALAUKA RAD  
City-St-Zip: OCKLAWAHA, FL 32179

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DAVID L SCHWARTZ

PRES

04/04/2008

Electronic Signature of Signing Officer or Director

Date