2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# L03000015770

Entity Name: CREATIVE DOOR & MILLWORK, LLC

Current Principal Place of Business:

2840 SOUTH STREET
FORT MYERS, FL 33916 US

New Principal Place of Business:

Current Mailing Address:

2840 SOUTH STREET
FORT MYERS, FL 33916 US

New Mailing Address:

FEI Number: 20-0013370 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GOODLETTE COLEMAN & JOHNSON PA
4001 TAMIAMI TRAIL STE 300
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: STOCK, STEVEN
Address: 3834 HIDDEN TRAIL
City-St-Zip: ONEIDA, WI 54155

Title: MGR (X) Delete
Name: PHILIP, JOHN R
Address: 15161 CEDAR WOOD LANE #1206
City-St-Zip: NAPLES, FL 34108

Title: MGR ( ) Delete
Name: READ, CAN'T
Address: 2250 SFORD WAY
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change ( ) Addition
Name: CHRISTOPHER, BRYAN D
Address: 2257 REGAL WAY
City-St-Zip: NAPLES, FL 34110

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHRISTOPHER D. BRYAN MGR 04/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date