


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # M02000001852**

1. Entity Name  
 MODERN WOODCRAFTS, LLC



Principal Place of Business 72 NORTHWEST DR. FARMINGTON INDUSTRIAL PARK FARMINGTON, CT 06034	Mailing Address 72 NORTHWEST DR. FARMINGTON INDUSTRIAL PARK FARMINGTON, CT 06034
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**DO NOT WRITE IN THIS SPACE**



03252004 No Chg-LLC      CR2E083 (10/03)

4. FEI Number 04-3600607	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SHUMAN, PHILIP W 72 NORTHWEST DR. FARMINGTON, CT 06034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RAMSAY, DONALD C 72 NORTHWEST DR. FARMINGTON, CT 06034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOUCHARD, JEAN LOUIS 72 NORTHWEST DR. FARMINGTON, CT 06034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KALLENBACH, WILLIAM M 72 NORTHWEST DR. FARMINGTON, CT 06034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000149727  
 05/03/04-80198-011 50.00

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 Donald C Ramsay      Date 4-27-04      Daytime Phone # (860)677-7371

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE