

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000020059

**Entity Name:** CUSTOM TILE AND COUNTERTOPS OF NORTHWEST  
FLORIDA, L.L.C

**Current Principal Place of Business:**

5270 SPRINGDALE DR.  
MILTON, FL 32570

**Current Mailing Address:**

5270 SPRINGDALE DR.  
MILTON, FL 32570

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

GOODEN, JEFF B  
5270 SPRINGDALE DR.  
MILTON, FL 32570 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

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGR
Name	BURGER, JAMES R	Name	GOODEN, JEFF B
Address	6866 N.HWY 89	Address	5270 SPRINGDALE DR.
City-State-Zip:	MILTON FL 32570	City-State-Zip:	MINTON FL 32570

*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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JEFF GOODEN**

**MGRM**

**04/02/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date