

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000049082

**Entity Name:** TIMOTHY OARE CABINetry & TRIM LLC

**Current Principal Place of Business:**

4802 109TH ST. NO.  
ST. PETERSBURG, FL 33708

**Current Mailing Address:**

4802 109TH ST. NO.  
ST. PETERSBURG, FL 33708 US

**FEI Number:** 45-5037463

**Certificate of Status Desired:** No

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

OARE, TIMOTHY  
4802 109TH ST. NO.  
ST.PETERSBURG, FL 33708 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  
Name OARE, TIMOTHY  
Address 4802 109TH ST. NO.  
City-State-Zip: ST.PETERSBURG FL 33708

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

**SIGNATURE:** TIMOTHY OARE

MGM

03/16/2014

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

\_\_\_\_\_ Date