2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0000006394

Entity Name: SKEFFINGTON FURNITURE, L.L.C.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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POST OFFICE BOX 541569 LAKE WORTH, FL 33454

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 541569 LAKE WORTH, FL 33454

FEI Number: 52-2264370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HILLARY HARRISON GULDEN, ESQ., P.A. 4152 WEST BLUE HERON BLVD., SUITE 116 RIVIERA BEACH, FL 33404 US

SUITE 515 WEST PALM BEACH, FL 33401 US

HILLARY HARRISON GULDEN, ESQ., P.A.

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: HILLARY HARRISON GULDEN 04/30/2004

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

319 CLEMATIS STREET

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SKEFFINGTON, JOHN
 Name:

 Address:
 1055 GATOR TRAIL
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33409
 City-St-Zip:

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 SKEFFINGTON, JOEI

 Address:
 Address:
 1055 GATOR TRAIL

 City-St-Zip:
 City-St-Zip:
 WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOEI SKEFFINGTON MGRM 04/30/2004