


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000020782</b> 1. Entity Name GRACEFUL HANDS WOODWORKING, L.L.C.	
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Principal Place of Business 5721 SOUTHWEST 95TH STREET GAINESVILLE, FL 32608	Mailing Address 5721 SOUTHWEST 95TH STREET GAINESVILLE, FL 32608
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**DO NOT WRITE IN THIS SPACE**



04232004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 56-2289497	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  HOWARD, SCOTT F 5721 SOUTHWEST 95TH STREET GAINESVILLE, FL 32608	<b>DO NOT WRITE IN THIS SPACE</b>
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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 *[Signature]* (NOTE: Registered Agent signature required when reinstalling) DATE 4/28/04

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

U000000141508  
04/30/04-80013-007 55.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOWARD, SCOTT F 5721 SOUTHWEST 95TH STREET GAINESVILLE, FL 32608
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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)(i), 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: *[Signature]* (352) 4/28/04 376-3007

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