

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024662

FILED  
Jan 22, 2005  
Secretary of State

**Entity Name:** MASTERCRAFT HOME IMPROVEMENTS, LLC

**Current Principal Place of Business:**

8732 OLDHAM WAY  
WEST PALM BEACH, FL 33412 US

**New Principal Place of Business:**

**Current Mailing Address:**

8732 OLDHAM WAY  
WEST PALM BEACH, FL 33412 US

**New Mailing Address:**

**FEI Number:** 51-0430650

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAMALHO, SUSAN  
9445 SOUTHAMPTON PLACE  
BOCA RATON, FL 33434 US

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

STRIANESE, MICHAEL  
8732 OLDHAM WAY  
WEST PALM BEACH, FL 33412 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: MICHAEL STRIANESE

01/22/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: MALONE, KIM F  
Address: 702 MIRAMAR LANE  
City-St-Zip: WEST PALM BEACH, FL 33410 US

Title: MGRM ( ) Delete  
Name: STRIANESE, VINCENT A  
Address: 3515 VILLAGE BLVD, APT 302  
City-St-Zip: WEST PALM BEACH, FL 33409 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: VINCENT STRIANESE

MGRM

01/22/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date