

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-26-2004 90136 036 ****55.00

DOCUMENT # L02000025996

1. Entity Name

E.W. SMITH CARPENTRY L.L.C.



Principal Place of Business

2582 PEPPER DRIVE
NAVARRE FL 32566

Mailing Address

2582 PEPPER DRIVE
NAVARRE FL 32566

14026856



MOORE CR2E083 (11/03)

2. Principal Place of Business

2498 SEAVIEW CT.

Suite, Apt. #, etc.

3. Mailing Address

2498 SEAVIEW CT.

Suite, Apt. #, etc.

City & State

NAVARRE FL.

City & State

NAVARRE FL.

4. FEI Number

02-0542519

Applied For

Not Applicable

Zip

32566

Country

SANTA ROSA

Zip

32566

Country

SANTA ROSA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, ERIC W
2582 PEPPER DRIVE
NAVARRE FL 32566

7. Name and Address of New Registered Agent

Name ERIC W SMITH

Street Address (P.O. Box Number is Not Acceptable)

2498 SEAVIEW CT.

City NAVARRE FL

FL

Zip Code 32566

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Eric Smith ERIC SMITH 2/29/04

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE P ☐ Delete
NAME SMITH, ERIC W
STREET ADDRESS 2582 PEPPER DRIVE
CITY-ST-ZIP NAVARRE FL 32566

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR. M ☒ Change ☐ Addition
NAME SMITH, W, ERIC
STREET ADDRESS 2498 SEAVIEW CT.
CITY-ST-ZIP NAVARRE FL. 32566

TITLE MGR. M ☒ Change ☒ Addition
NAME SMITH, M. CAROLYN
STREET ADDRESS 2498 SEAVIEW CT.
CITY-ST-ZIP NAVARRE FL. 32566

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Eric Smith ERIC W SMITH 2/29/04 850 939 5170