

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009606

FILED
Apr 24, 2006
Secretary of State

Entity Name: M. C. CABINETRY BY DAVID MCCREIGHT, LLC

Current Principal Place of Business:

1025 MILLER DRIVE, #139A
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

Current Mailing Address:

1025 MILLER DRIVE, #139A
#130
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

1025 MILLER DRIVE, #139A
#139A
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 27-0052124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCREIGHT, ELIZABETH
1256 HIBISCUS LANE
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCCREIGHT, DAVID
Address: 1025 MILLER DRIVE, #139A
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: MGRM () Delete
Name: MCCREIGHT, ELIZABETH
Address: 1025 MILLER DRIVE, #139A
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 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 Chapter 119, 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: DAVID MCCREIGHT

MGR

04/24/2006

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