

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016204

FILED
Jul 11, 2005
Secretary of State

Entity Name: ROOM SERVICE FURNISHINGS, LLC

Current Principal Place of Business:

426 CANAL ST.
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

426 CANAL ST.
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 75-3118914 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MCCRACKEN, PATRICIA A
1829 MANGO TREE DRIVE
EDGEWATER, FL 32141 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCCracken, Maurice E Jr.
Address: 1829 MANGO TREE DRIVE
City-St-Zip: EDGEWATER, FL 32141

Title: MGR () Delete
Name: MCCracken, Patricia A
Address: 1829 MANGO TREE DRIVE
City-St-Zip: EDGEWATER, FL 32141

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: PATRICIA MCCracken

PRES

07/11/2005

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