

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028398

FILED
Aug 05, 2005
Secretary of State

Entity Name: OCEANSIDE CABINETS, LLC

Current Principal Place of Business:

16 NORTH OLEANDER STREET
FELLSMERE, FL 32948 US

New Principal Place of Business:

Current Mailing Address:

16 NORTH OLEANDER STREET
FELLSMERE, FL 32948 US

New Mailing Address:

P.O. BOX 518
FELLSMERE, FL 32948 US

FEI Number: 20-0130684 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:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

NIGBOR, DAVID J
16 N. OLEANDER STREET
FELLSMERE, FL 32948 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: DAVID J. NIGBOR

08/05/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NIGBOR, DAVID J
Address: 1608 MOONLIT DRIVE
City-St-Zip: RICHFIELD, WI 53076 US

ADDITIONS/CHANGES:

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: DAVID J. NIGBOR

MGRM

08/05/2005

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