

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032353

FILED  
Feb 09, 2005  
Secretary of State

Entity Name: RT COASTAL FRAMING, LLC

**Current Principal Place of Business:**

68 FALLEN OAK LANE  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 354950  
PALM COAST, FL 32135

**New Mailing Address:**

FEI Number: 20-0212354

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUMANA, VICTOR  
68 FALLEN OAK LANE  
PALM COAST, FL 32137 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: RUMANA, VICTOR  
Address: 1450 NORTH US 1, STE. 200  
City-St-Zip: ORMOND BEACH, FL 32174

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BUHR, DAVID  
Address: 68 FALLEN OAK LN  
City-St-Zip: PALM COAST, FL 32137

Title: MGRM ( ) Change (X) Addition  
Name: BUHR, LACY  
Address: 68 FALLEN OAK LN  
City-St-Zip: PALM COAST, FL 32137

Title: MGRM ( ) Change (X) Addition  
Name: RUMANA, VICTOR  
Address: 68 FALLEN OAK LN  
City-St-Zip: PALM COAST, FL 32137

Title: MGRM ( ) Change (X) Addition  
Name: RUMANA, ALICE  
Address: 68 FALLEN OAK LN  
City-St-Zip: PALM COAST, FL 32137

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 BUHR

MGRM

02/09/2005

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