2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000044348

1. Entity Name
CALA GARAGE DOORS, LLC

4940 NE 6TH ST OCALA, FL 34470

Principal Place of Business

4940 NE 6TH ST OCALA, FL 34470

Mailing Address

FILED
Apr 29, 2008 08:00 AN
Secretary of State



DO NOT WRITE IN THIS SPACE

04272008No Chg-LLC CR2E083 (12/07)

4. FEI Number Applied For Not Applied For Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

GREENE, ALBERT F 4940 NE 6TH ST OCALA, FL 34470 DO NOT WRITE
IN THIS SPACE

The above named entity submits this statement for the purpose of chan- the obligations of registered agent.	glng its registered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept
Signature Signature, typed or printed name of registered agent and trie if applicable	(NOTE: Registered Apert signature required when reinstating)	DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000331492 05/22/08-80017-004 138.75

MANAGING MEMBERS/MANAGERS MGRM DTLE GREENE, ALBERT F 4940 NE 6TH ST STREET ADDRESS CITY-ST-ZIP **OCALA, FL 34470** TITLE NAME STREET ADDRESS CITY-ST-ZIP THRUE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP FITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TIFF NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 BIOMENS MANAGENS MEMBER OR AUTHORITES REPORTSHYAYIVE

- 0 0

Daytime Phone #