2005 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Mar 24, 2005 08:00 AM DOCUMENT # L03000046523 < **Secretary of State** GERRY THOMAS JR. CARPENTRY, LLC Mailing Address Principal Place of Business **516 EDGEWATER DRIVE 516 EDGEWATER DRIVE** PENSACOLA, FL 32507 PENSACOLA, FL 32507 03192005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0413969 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE THOMAS, GERRY O JR. 516 EDGEWATER DRIVE PENSACOLA, FL 32507 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE (NOTE, Registered Agent signature required when reinstating) Signature, lyped or printed name of registered agont and title if applicable Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE MGR THOMAS, GERRY JR. NAME 516 EDGEWATER DR. STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32507 U000UU275362 U3/24/US-8UU50-021 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 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 signature shall have the same legal effect as if made under cath; 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.

Daylime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE