

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046927

FILED
Jul 01, 2004
Secretary of State

Entity Name: HERB ELLARD CABINET DESIGN & MFG., LLC

Current Principal Place of Business:

624 COMMERCIAL BLVD
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

3310 SOUTH COCONUT ISLAND DR #201
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 59-3709444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CECIL, W. JEFFREY
5801 PELICAN BAY BLVD, STE 300
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

ANN, ELLARD
3310 S. COCONUT ISLAND DRIVE
201
NAPLES, FL 34134 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: ANN ELLARD

07/01/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

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

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: HERB, ELLARD
Address: 3310 S. COCONUT ISLAND DIVE #201
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: MGR () Change (X) Addition
Name: ANN, ELLARD
Address: 3310 S. COCONUT ISLAND DRIVE # 201
City-St-Zip: BONITA SPRINGS, FL 34134 US

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: ANN ELLARD

MGR

07/01/2004

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