

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046927

FILED
Mar 28, 2007
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:

3310 SOUTH COCONUT ISLAND DR
201
BONITA SPRINGS, FL 34134

FEI Number: 59-3709444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

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

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

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Chapter 119, 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

03/28/2007

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