

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR)**

FILED
Oct 01, 2004 8:00 am
Secretary of State

9/8/

09-08-2004 90002 006 ****50.00

DOCUMENT # L03000048126 1. Entity Name GEORGE MAHAN CERAMIC TILE, LLC.					
Principal Place of Business 2317 SILVER PALM DRIVE EDGEWATER FL 32141			Mailing Address 2317 SILVER PALM DRIVE EDGEWATER FL 32141		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 593331061	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MACK, JAMES E 1321 SAXON DRIVE NEW SMYRNA BEACH FL 32169				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when amending)</small>					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By September 8, 2004					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAHAN, GEORGE 2317 SILVER PALM DRIVE EDGEWATER FL 32141 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 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: <u>George W Mahan III</u> GEORGE W MAHAN III 9/27/04 386-427-7110 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

34010635



MOORE CR2E083 (4/04)



Attachment
34010635

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

September 21, 2004

GEORGE MAHAN CERAMIC TILE, L.L.C.
2317 SILVER PALM DRIVE
EDGEWATER, FL 32141

Subject: GEORGE MAHAN CERAMIC TILE, L.L.C.

Reference Number: L03000048126

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

X (The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.)

DONE - SIGNED 9/27/04

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 6478, TALLAHASSEE, FLORIDA 32314 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.



If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/RH
ANNUAL REPORTS SECTION