2007 LIMITED LIABILITY COMPANY ANNUAL REPORT-(AR)

May 09, 2007 8:00 am Secretary of State DOCUMENT*# L33000048126 05-09-2007 90029 016 ****50.00 GEORGE MAHAN CERAMIC TILE, L.L.C. Principal Place of Business Mailing Address 3210 YULE TREE DR EDGEWATER FL 32141 3210 YULE TREE DR EDGEWATER FL 32141 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/06) City & State City & State Applied For 4. FEI Number 59-3331061 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MAHAN, GEORGE W III 3210 YUCE TREE DR Street Address (P.O. Box Number is Not Acceptable) EDGEWATER FL 32141 Zip Code FL 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, typed or project name of registered agent and title it applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. HILE THE Change | MGRM ☐ Addition MAHAN, GEORGE W III NAME YULE THE 3210 YUCE TREE DR STREET LADDRESS STREET ADDRESS CITY-ST-7IP EDGEWATER FL 32141 CITY ST ZIP BILLE ☐ Delete THIE Change Addition NAMI NAMI STREET ADDRESS STREET ADDRESS CITY-SI-/IP CUY SL ZP HILE ☐ Defete IIIII Change ■ Addition STREET ADDRESS STRICT ADDRESS CITY SE-71F CHY ST ZIP Change TITLE ☐ Delete THE Addition NAM NAMI STREET ADDRESS STREET ADDRESS CITY - ST - 7IP CITY ST-ZIP ☐ Delete ☐ Change Addition HILE THE NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY ST ZIP Delete Change Addition NAMI NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY ST ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal 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. [386]

3210 YULE TREE DRIVE

EDGEWATER, FLORIDA 32141

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MENOS MENOS AND THE PRESENTATIVE

SIGNATURE:

4.76.07

FILED