


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000049717 1. Entity Name GEOFF STATLER WOODCRAFTS LLC	
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Principal Place of Business 2601 WEBB AVE BAY 4 DELRAY BEACH, FL 33444	Mailing Address 2601 WEBB AVE BAY 4 DELRAY BEACH, FL 33444
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DO NOT WRITE IN THIS SPACE



02272008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 26-4061290	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent STATLER, GEOFFREY 2601 WEBB AVE, BAY 4 DELRAY BEACH, FL 33444
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**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000869354
04/09/08-80044-022 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STATLER, GEOFFREY 2601 WEBB AVE, BAY 4 DELRAY BEACH, FL 33444
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 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:

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

Date

Daytime Phone #

3/20/08 561 279 8960