

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049898

FILED  
May 01, 2009  
Secretary of State

Entity Name: CENTRAL FLORIDA TRIM LLC

## Current Principal Place of Business:

2432 LAKE VISTA CT, #214  
CASSELBERRY, FL 32707

## New Principal Place of Business:

7951 BARROWOOD STREET  
ORLANDO, FL 32835

## Current Mailing Address:

2432 LAKE VISTA CT, #214  
CASSELBERRY, FL 32707

## New Mailing Address:

7951 BARROWOOD STREET  
ORLANDO, FL 32835

FEI Number: 45-0531126

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

MCNEIL, SAMUEL J  
2432 LAKE VISTA CT, #214  
CASSELBERRY, FL 32707 US

## Name and Address of New Registered Agent:

MCNEIL, SAMUEL J  
7951 BARROWOOD STREET  
ORLANDO, FL 32835 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: SAMUEL J. MCNEIL

05/01/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MCNEILL, SAMUEL J  
Address: 2432 LAKE VISTA CT, #214  
City-St-Zip: CASSELBERRY, FL 32707

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MCNEILL, SAMUEL J  
Address: 7951 BARROWOOD STREET  
City-St-Zip: ORLANDO, FL 32835

I hereby certify that the information supplied with this filing does not qualify 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: SAMUEL J MCNEIL

MGR

05/01/2009

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