## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000053253 1. Entity Name BILL VANBURGER WOODWORKING, LLC Principal Place of Business Mailing A



FILED Jan 17, 2008 08:00 Al Secretary of State



VERO BEACH, FL 32968



DO NOT WRITE IN THIS SPACE

01072008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 65-0053556 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VANBURGER, WILLIAM 1133 36TH AVE SW VERO BEACH, FL 32962

885 35TH CT SW

VERO BEACH, FL 32968

DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of changing the obligations of registered agent	its registered office or registered agent,	or both, in the State of Florida.	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 U00000787458 01/17/08-80082-021 138.75

9. MANAGING MEMBERS/MANAGERS TITLE MGRM NAME VANBURGER, WILLIAM STREET ADDRESS 1133 36TH AVE SW CITY - ST - ZIP VERO BEACH, FL 32962 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. Thereby. certify that the information supplied with this filling 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: WILL TIME OF WILLIAM N VAN TOURGER.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-14-08

772-562-0690

Date

Daytime Priorie #