

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000053823

**FILED**  
**Mar 20, 2009**  
**Secretary of State**

**Entity Name:** VOLUSIA COUNTY FLOORING SPECIALISTS, LLC.

**Current Principal Place of Business:**

1276 OCEAN SHORE BLVD  
ORMOND BEACH, FL 32176 US

**New Principal Place of Business:**

1287 N US HWY 1  
SUTIE 3  
ORMOND BEACH, FL 32176 US

**Current Mailing Address:**

1276 OCEAN SHORE BLVD  
ORMOND BEACH, FL 32176 US

**New Mailing Address:**

1287 N US HWY 1  
SUTIE 3  
ORMOND BEACH, FL 32176 US

**FEI Number:** 16-1766880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOWIE, IRVIN S  
4125 SALINA LANE  
ORMOND, FL 32174 US

**Name and Address of New Registered Agent:**

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:**

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BOWIE, IRVIN S  
Address: 4125 SALINA LANE  
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGRM ( ) Delete  
Name: BOWIE, IRVIN F  
Address: 1212 KILLARNEY DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** IRVIN S. BOWIE

MGR

03/20/2009

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