

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000054867

FILED
Feb 12, 2004
Secretary of State

Entity Name: ADVANCED TILE INSTALLATIONS, LLC

Current Principal Place of Business:

930 DON LEEN STREET
FT WALTON BEACH, FL 32547 US

New Principal Place of Business:

950 DON LEEN STREET
FT WALTON BEACH, FL 32547 US

Current Mailing Address:

930 DON LEEN STREET
FT WALTON BEACH, FL 32547 US

New Mailing Address:

950 DON LEEN STREET
FT WALTON BEACH, FL 32547 US

FEI Number: 30-0098244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROCHESSETTE, PAUL
930 DON LEEN STREET
FT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

TROCHESSETTE, PAUL
950 DON LEEN STREET
FT WALTON BEACH, FL 32547 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:

02/12/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: TROCHESSETTE, PAUL
Address: 930 DON LEEN STREET
City-St-Zip: FT WALTON BEACH, FL 32547 US

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL TROCHESSETT

MGR

02/12/2004

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