2005 Limited Liability Company Annual Report

AM III 3 37 Principal Place of Business 2775 CATHEDRAL DRIVE 07 311 ALLAHASSEE, FL 32310 US AllaHASSEE		1ENT # L040000011	181		05.	. "ED	
Sign April 40: do Business  LEVEL Francis Maples Dr. Survey  Survey As State  City & State  City & State  City & State  County  Survey	1. Entity Name RODNEY LEWIS FLOOR COVERING, LLC				TALECHE	AY-4 AH IO.	
Sign April 40: do Business  LEVEL Francis Maples Dr. Survey  Survey As State  City & State  City & State  City & State  County  Survey	2775 CATHED Lot 311	RAL DRIVE	2775 CATHEDRAL DRIVE LOT 311	11 - 1	LITERIOR DE OPUL PETO COM APIO DOMON	ASSEE FLORIDA	
County  Signature  A. FEI Norther  A. FEI Nort	2. Principal Pla	ace of Business  Mades Dr.		cis maple			
Tallahanassey  Tallahanssey  T	Suite, Apt. #	i, etc.	Suite, Apt. #, etc.		03302005 Chg-LLC	CR2E083 (10/03)	
\$5.00 Additional of Status Desired   \$5.00 Additional Fee Regularized   \$5.00 Additional Fee Regularized   \$6. Name and Address of Current Registered Agent   7. Name and Address of New Registered Agent   Name   N	City & State	05580 D/C		271		Applied For Not Applicable	
S. Name and Address of Current Registered Agams	2 <sup>Zip</sup>	1 4		Country			
LEWIS, RODNEY 2776 CATHEDRAL DRIVE LOT 311 TALLAHASSEE, FL 32310  City	0630		Registered Agent	CEOTI	7. Name and Address of New Reg		
Street Address (P.O. Box Number is Not Acceptable)  City  TALLAHASSEE, FL 32310  City  Cit	. =	ONEY		Name			
Ety FL Zip Code  8. The above named only submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am hymitian with, and according to the obligatory of reflected agent. J June 10 Jun	2775 CATHEDRAL DRIVE LOT 311			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
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 familiari with, and accept the octopatorypy of optigrend agent.    SIGNATURE	TALLAHASSEE, FL 32310						
SIGNATURE				' '		<u></u>	
Due by Miny 1, 2005    MANAGING MEMBERS / MANAGERS   10.   ADDITIONS / CHANGES   Additional control of State	SIGNATURE _	ROMMY Sewing Service agent of regressed agent of	nd title if applicable. (NOTE:	Registered Agent signisture requ			
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NAME STREET ADDRESS CITY-ST-ZIP  11. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the "imited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.  SIGNATURE:  NAME STREET ADDRESS CITY-ST-ZIP  11. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the "imited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.  SIGNATURE:	name Street address		□ Delete	NAME STREET ADDRESS		☐ Change ☐ Addition	
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	11. I hereby c indicated fimited liab	ertify that the information supplied with on this report is true and accurate and allity company or the receiver or trustee	this filing does not qualify for that my signature shall have the empowered to execute this re	the exemption stated in the same legal effect as eport as required by Ch	Section 119.07(3)(i), Florida Statutes. I fit if made under oath; that I am a managin apter 608, Florida Statutes.	urther certify that the information g member or manager of the	
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