

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000003000

FILED  
Jun 30, 2005  
Secretary of State

Entity Name: RAWSON FINE CABINETRY, LLC

**Current Principal Place of Business:**

1271 SE 5TH AVENUE  
POMPANO BEACH, FL 33060 US

**New Principal Place of Business:**

1020 NE 44 CT  
FT LAUDERDALE, FL 33334 US

**Current Mailing Address:**

1271 SE 5TH AVENUE  
POMPANO BEACH, FL 33060 US

**New Mailing Address:**

FEI Number: 80-0091284      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:**

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

WEGENER, KARL A  
1271 SE 5TH AVENUE  
POMPANO BEACH, FL 33060 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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WEGENER, KARL A  
Address: 1271 SE 5TH AVENUE  
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: MGRM (X) Delete  
Name: DOUGLAS, ADAM C  
Address: 8525 NW 29TH DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065 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 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: KARL A WEGENER

MGRM

06/30/2005

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