2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000005255

Entity Name

GEORGE'S CABINET & WOODWORK SHOP LLC



FILED Apr 27, 2006 08:00 AN Secretary of State

Principal Place of Business 558 PORT LEON DR ST MARKS, FL 32352 Mailing Address PO BOX 393 ST MARKS, FL 32355



DO NOT WRITE IN THIS SPACE 04262006 No Chg-LLC

Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

MCCRANIE, GEORGE 558 PORT LEON DR ST MARKS, FL 32352

NAME STREET ADDRESS CITY: ST-7IP

DO NOT WRITE IN THIS SPACE

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8. The above the obligat	named entity submits this statement for the purpose of changing ions of registered agent.	ng its registered office or registered agent, or be	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE			
Fi	lling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NGRM MCCRANIE, GEORGE PO BOX 393 ST MARKS, FL 32355		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000538280 05/09/06-80051-012 55. 00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
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TITLE]	

11. I hereby certify that the information supplied with this filing 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: George Mc CHANIE SLEAGE 41/classic 4-26-06 925-5606

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MENBER, OR AUTHORIZED REPRESENTATIVE Date Dayling Phone #