2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 18, 2008 8:00 am Secretary of State

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DOCUMENT # L0400008217 1. Entity Name GENTRY'S WINDOWS AND DOORS, L.L.C.						04-18-2008				
Principal Plac		•			5(0004	870			
302 S.W. SCF		302 S.W. SCROLL CT	Mailing Address 302 S.W. SCROLL CT						· · ·	
PORT ST LUC	PORT ST LUCIE, FL 34	T ST LUCIE, FL 34953								
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2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address								
						MIN MIN MANTE MINER MANTE MATE	6) BBC)(BB)B) 18168	- 1100) (2011 100	EBB! WI INE!	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			08 Chg-LLC	CR2E083	3 (12/06)		
City & Stat	9	City & State	City & State		4. FEI N			→	oplied For	
		7-				2345652 .			ot Applicable	
Zip	Country	Zip	Zip Cour		5. Certificate of Status Des			5.00 Add ee Require		
	6. Name and Address of Curre	nt Registered Agent	Registered Agent			7. Name and Address of New Registered Agent				
					Name					
GENTRY				Street Addre	ss (P.O. Box N	umber is Not Acceptable				
302 S.W. SCROLL CT PORT ST. LUCIE, FL 34953				Street Address (P.O. Box Number is Not Acceptable)						
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2										
			Cit				FL	Zip Cod	e	
P. The above	named actity submits this statement	ad office or rec	ietorad agent (v both in the State of Ele		miliar with	and accept			
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 familiar with, and accept the obligations of registered agent.									and accept	
SIGNATURE Signature, typed or printed name of registered agent and tide if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
-		•••••	•			-,				
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.					Make check payable to Florida Department of State				
9. MANAGING MEMB		RS/MANAGERS 10.		ADDITIONS/CHANGES						
TITLE	MGRM	Delete	TITLE				[Change	Addition	
NAME STREET ADDRESS	GENTRY, PAUL C 302 S.W. SCROLL CT		NAM	E Et address						
CITY-SI-ZIP	PORT ST LUCIE, FL 34953			-ST-ZIP						
TITLE			TITLE				Γ	Change	Addition	
NAME	GENTRY, ELIZABETH A						L			
STREET ADDRESS	02 SW SCROLL CT		STRE	ET ADDRESS						
CITY-ST-ZIP	PORT SAINT LUCIE, FL 34953		CITY	-S1 - ZIP						
TITLE			TITLE				(Change	Addition	
NAME STREET ADDRESS			NAM	E Et address						
CITY-SI-ZIP			-	-ST-ZIP		•				
TITLE		Delete	TITLE				Γ	☐ Change	Addition	
NAME		Car Doleis	NAMI				•	4		
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NAME			NAM]						
STREET ADORESS CITY-SI-ZIP				ET ADDRESS - ST - ZIP						
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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 entrustee empowered to execute this report as required by Chapter 608, Florida Statutes.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

NAME

STREET ADDRESS CITY-ST-ZIP

4/15/2008

775 708 303 Daytime Phone #

Elozabeta A Genta, MANTARA