

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000009762

FILED
Aug 15, 2005
Secretary of State

Entity Name: MEYER CUSTOM WOODWORKING AND MILLWORK LLC

Current Principal Place of Business:

3930 CENTER GATE CIR
SARASOTA, FL 34233

New Principal Place of Business:

5382 CATALYST AVE
SARASOTA, FL 34233

Current Mailing Address:

3930 CENTER GATE CIR
SARASOTA, FL 34233

New Mailing Address:

5382 CATALYST AVE
SARASOTA, FL 34233

FEI Number: 05-0551962 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:

MEYER, RICHARD
3930 CENTER GATE CIR
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

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: MGR () Delete
Name: MEYER, RICHARD
Address: 3930 CENTER GATE CIR
City-St-Zip: SARASOTA, FL 34233

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: MEYER, RICHARD
Address: 5382 CATALYST AVE
City-St-Zip: SARASOTA, FL 34233

Title: VP () Change (X) Addition
Name: GUILLEN, ANTHONY
Address: 5382 CATALYST AVE
City-St-Zip: SARASOTA, FL 34233

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: RICHARD MEYER

PRES

08/15/2005

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