

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012410

FILED
Aug 31, 2005
Secretary of State

Entity Name: TOM FOWLER CARPENTRY SERVICES LLC

Current Principal Place of Business:

810 W. YALE STREET
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

810 W. YALE STREET
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 56-2461000 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:

FOWLER, GERARD
810 W. YALE STREET
ORLANDO, FL 32804 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MRS. () Change (X) Addition
Name: COMBS, LAURA S FOWLER
Address: 810 W. YALE ST.
City-St-Zip: ORLANDO, FL 32804

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: LAURA S. COMBS

MRS.

08/31/2005

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