

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013101

Entity Name: MAHONEY'S CARPENTRY, LLC

FILED
Jun 15, 2005
Secretary of State

Current Principal Place of Business:

4963 SE BOLLARD AVE
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:
PO BOX 276
PORT SALERNO, FL 34992

New Mailing Address:

FEI Number: 59-3274710 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:**

MAHONEY, JAMIE M
4963 SE BOLLARD AVE
STUART, FL 34997 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: MAHONEY, JAMIE M
Address: 4963 SE BOLLARD AVE
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: MAHONEY, MICHAEL L
Address: 4963 SE BOLLARD AVE
City-St-Zip: STUART, FL 34997

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 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: JAMIE M. MAHONEY

MGRM

06/15/2005

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