2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2005
Secretary of State

DOCUMENT# L04000019279

Entity Name: HILL CUSTOM CARPENTRY "LLC."

Current Principal Place of Business:

2445 BAY GROVE ROAD
FREEPORT, FL 32439 US

New Principal Place of Business:

374 BEACON WAY
SANTA ROSA BEACH, FL 32459 US

Current Mailing Address:

2445 BAY GROVE ROAD
FREEPORT, FL 32439 US

New Mailing Address:

374 BEACON WAY
SANTA ROSA BEACH, FL 32459 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILL, DAVID E
2445 BAY GROVE ROAD
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

HILL, DAVID E
374 BEACON WAY
SANTA ROSA BEACH, FL 32459 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: DAVID EUGENE HILL 03/03/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: HILL, DAVID E
Address: 2445 BAY GROVE ROAD
City-St-Zip: FREEPORT, FL 32439 US

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

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: HILL, DAVID E P.
Address: 374 BEACON WAY
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: MGRM ( ) Change (X) Addition
Name: TETMAN, MITCHELL W V.P.
Address: 290 HURLEY
City-St-Zip: DE FUNIAK SPRINGS, FL 32433 US

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: DAVID E. HILL P 03/03/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date