

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026394

FILED
May 01, 2007
Secretary of State

Entity Name: DAVID'S CUSTOM CABINET'S, LLC

Current Principal Place of Business:

1120 SOUTH MAIN STREET
#9
HIGH SPRINGS, FL 32643 US

New Principal Place of Business:

10 NW 9TH STREET
HIGH SPRINGS, FL 32643 US

Current Mailing Address:

17318 NW 217TH TERRACE
HIGH SPRINGS, FL 32643 US

New Mailing Address:

10 NW 9TH STREET
HIGH SPRINGS, FL 32643 US

FEI Number: 41-2133410 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:

MCINTIRE, DAVID W
17318 NW 217TH TERRACE
HIGH SPRINGS, FL 32643 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:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: MCINTIRE, ROBYN S
Address: 17318 NW 217TH TERRACE
City-St-Zip: HIGH SPRINGS, FL 32643 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: MCINTIRE, DAVID W
Address: 17318 NW 217TH TERRACE
City-St-Zip: HIGH SPRINGS, FL 32643

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 Chapter 119, 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 W. MCINTIRE

MGRM

05/01/2007

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