

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026601

FILED
Apr 29, 2005
Secretary of State

Entity Name: TILE WORX BY TIM "L.L.C."

Current Principal Place of Business:

6329 GOMEZ ROAD
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

241 BARCO RD.
ST. AUGUSTINE, FL 32080

Current Mailing Address:

6329 GOMEZ ROAD
ST. AUGUSTINE, FL 32080

New Mailing Address:

241 BARCO RD.
ST. AUGUSTINE, FL 32080

FEI Number: 06-1722107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WRIGLEY, TIMOTHY W SR
6329 GOMEZ ROAD
ST. AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

WRIGLEY, TIMOTHY W SR
241 BARCO RD.
ST. AUGUSTINE, FL 32080 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: TIMOTHY W. WRIGLEY, SR.

04/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: WRIGLEY, DIANNE
Address: 6329 GOMEZ ROAD
City-St-Zip: ST. AUGUSTINE, FL 32080

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WRIGLEY, DIANNE
Address: 241 BARCO RD.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGR () Change (X) Addition
Name: WRIGHT, RODNEY
Address: 400 ANASTASIA BLVD. APT A
City-St-Zip: ST. AUGUSTINE, FL 32080

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: DIANNE WRIGLEY

MGR

04/29/2005

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