

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 04, 2005 8:00 am
Secretary of State

03-10-2005 90038 016 ****50.00

DOCUMENT # L04000029799																																																																																																													
1. Entity Name RR CARPENTRY LLC																																																																																																													
Principal Place of Business 1133 S. RIDGEWOOD AVE. 1 DAYTONA BEACH FL 32114 US			Mailing Address 1133 S. RIDGEWOOD AVE. 1 DAYTONA BEACH FL 32114 US																																																																																																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																																										
City & State			City & State																																																																																																										
Zip		Country		4. FEI Number 20-1026188																																																																																																									
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable																																																																																																									
6. Name and Address of Current Registered Agent REGINA, ROBERT J 1133 S. RIDGEWOOD AVE. 1 DAYTONA BEACH FL 32114																																																																																																													
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																													
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																													
SIGNATURE _____ (NOTE: Registered Agent signature required when re-instating)																																																																																																													
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005																																																																																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="2" style="text-align: left;">10. ADDITIONS/CHANGES</th> </tr> </thead> <tbody> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">MGRM</td> <td style="width: 15%;">TITLE</td> <td style="width: 65%;"> </td> </tr> <tr> <td>NAME</td> <td>REGINA, ROBERT J</td> <td>NAME</td> <td> </td> </tr> <tr> <td>STREET ADDRESS</td> <td>1133 S RIDGEWOOD AVE. #1</td> <td>STREET ADDRESS</td> <td> </td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DAYTONA BEACH FL 32114</td> <td>CITY-ST-ZIP</td> <td> </td> </tr> <tr> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Delete</td> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td> </td> <td>TITLE</td> <td> </td> </tr> <tr> <td>NAME</td> <td> </td> <td>NAME</td> <td> </td> </tr> <tr> <td>STREET ADDRESS</td> <td> </td> <td>STREET ADDRESS</td> <td> </td> </tr> <tr> <td>CITY-ST-ZIP</td> <td> </td> <td>CITY-ST-ZIP</td> <td> </td> </tr> <tr> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Delete</td> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td> </td> <td>TITLE</td> <td> </td> </tr> <tr> <td>NAME</td> <td> </td> <td>NAME</td> <td> </td> </tr> <tr> <td>STREET ADDRESS</td> <td> </td> <td>STREET ADDRESS</td> <td> </td> </tr> <tr> <td>CITY-ST-ZIP</td> <td> </td> <td>CITY-ST-ZIP</td> <td> </td> </tr> <tr> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Delete</td> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td> </td> <td>TITLE</td> <td> </td> </tr> <tr> <td>NAME</td> <td> </td> <td>NAME</td> <td> </td> </tr> <tr> <td>STREET ADDRESS</td> <td> </td> <td>STREET ADDRESS</td> <td> </td> </tr> <tr> <td>CITY-ST-ZIP</td> <td> </td> <td>CITY-ST-ZIP</td> <td> </td> </tr> <tr> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Delete</td> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td> </td> <td>TITLE</td> <td> </td> </tr> <tr> <td>NAME</td> <td> </td> <td>NAME</td> <td> </td> </tr> <tr> <td>STREET ADDRESS</td> <td> </td> <td>STREET ADDRESS</td> <td> </td> </tr> <tr> <td>CITY-ST-ZIP</td> <td> </td> <td>CITY-ST-ZIP</td> <td> </td> </tr> <tr> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Delete</td> <td colspan="2" style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </tbody> </table>						9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES		TITLE	MGRM	TITLE		NAME	REGINA, ROBERT J	NAME		STREET ADDRESS	1133 S RIDGEWOOD AVE. #1	STREET ADDRESS		CITY-ST-ZIP	DAYTONA BEACH FL 32114	CITY-ST-ZIP		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE		TITLE		NAME		NAME		STREET ADDRESS		STREET ADDRESS		CITY-ST-ZIP		CITY-ST-ZIP		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE		TITLE		NAME		NAME		STREET ADDRESS		STREET ADDRESS		CITY-ST-ZIP		CITY-ST-ZIP		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE		TITLE		NAME		NAME		STREET ADDRESS		STREET ADDRESS		CITY-ST-ZIP		CITY-ST-ZIP		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE		TITLE		NAME		NAME		STREET ADDRESS		STREET ADDRESS		CITY-ST-ZIP		CITY-ST-ZIP		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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11. 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 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: <u>Robert J Regina</u>																																																																																																													
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE																																																																																																													
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