

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048367

FILED
Jan 06, 2005
Secretary of State

Entity Name: CONTRACTOR'S WAREHOUSES LLC

Current Principal Place of Business:

2861 WORTH AVE
ENGLEWOOD, FL 34224

New Principal Place of Business:

16110 SUNSET PINES CIRCLE
BOCA GRANDE, FL 33921

Current Mailing Address:

2270 S. MCCALL ROAD
ENGLEWOOD, FL 34224

New Mailing Address:

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

Name and Address of Current Registered Agent:

KIRKPATRICK, JOHN R
P.O. BOX 2
BOCA GRANDE, FL 33921 US

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGR () Delete
Name: KIRKPATRICK, JOHN R
Address: P.O. BOX 2
City-St-Zip: BOCA GRANDE, FL 33921

Title: MGR () Delete
Name: KIRKPATRICK, DIANNE
Address: P.O. BOX 2
City-St-Zip: BOCA GRANDE, FL 33921

ADDITIONS/CHANGES:

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

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

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: JOHN R KIRKPATRICK MGR 01/06/2005

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