

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000055058

FILED
Apr 09, 2005
Secretary of State

Entity Name: ADVANCED CARPENTRY, LLC

Current Principal Place of Business:

7511SEARS BLVD.
PENSACOLA, FL 32514 US

New Principal Place of Business:

Current Mailing Address:

7511SEARS BLVD.
PENSACOLA, FL 32514 US

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:

RIVERS, SAMUEL M JR.
1209 BLUE FOX PL.
PENSACOLA, FL 32514 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: MGRM () Delete
Name: RIVERS, SAMUEL M JR.
Address: 1209 BLUE FOX PL.
City-St-Zip: PENSACOLA, FL 32514 US

Title: MGRM () Delete
Name: WALKER, JAMES C
Address: 1501 E. MAXWELL ST
City-St-Zip: PENSACOLA, FL 32503 US

Title: MGRM () Delete
Name: SMITH, BRETT A
Address: 8260 FORDHAM DR.
City-St-Zip: PENSACOLA, FL 32514 US

ADDITIONS/CHANGES:

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

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

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

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: SAMUEL M. RIVERS JR. MGRM 04/09/2005

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