

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057806

FILED  
May 16, 2008  
Secretary of State

**Entity Name:** NATHANAEL DAVIS FLOORING (STONE & TILE), LLC

**Current Principal Place of Business:**

826 MEADOW LANE  
FORT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

826 MEADOW LANE  
FORT WALTON BEACH, FL 32547

**New Mailing Address:**

FEI Number: 20-1448755      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:**

DAVIS, NATHANAEL T  
826 MEADOW LANE  
FORT WALTON BEACH, FL 32547      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:**

Title: MGR      ( ) Delete  
Name: DAVIS, NATHANAEL T  
Address: 826 MEADOW LANE  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: MGRM      (X) Delete  
Name: BROWN, TIM P  
Address: 447 SANDY RIDGE CIRCLE  
City-St-Zip: MARY ESTHER, FL 32569 US

**ADDITIONS/CHANGES:**

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 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: NATHANAEL T. DAVIS

MGR

05/16/2008

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