

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 17, 2005 8:00 am
Secretary of State

08-17-2005 90068 005 ****55.00

14013673



08102005 Chg-LLC CR2E083 (10/03)

4. FEI Number **04381 8209** Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

THE FLOORING STORE, INC.
2816 SHADER ROAD
ORLANDO, FL 32808

7. Name and Address of New Registered Agent

Name **Tom Miller**
Street Address (P.O. Box Number is Not Acceptable)
17941 US HWY 441
City **MOUNT DORA** FL Zip Code **32757**

8. The above named entity adopts 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, the registered agent.

SIGNATURE **Tom Miller** DATE **08/14/05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by September 7, 2005

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
NAME **MILLER, TOM**
STREET ADDRESS **1818 SEEDLING COURT**
CITY-ST-ZIP **CLERMONT, FL 34711**

TITLE **MGRM** ☒ Delete
NAME **THE FLOORING STORE, INC.**
STREET ADDRESS **2816 SHADER ROAD**
CITY-ST-ZIP **ORLANDO, FL 32808**

TITLE **MGRM** ☐ Delete
NAME **NARCISCO STEPHEN**
STREET ADDRESS **1117 CRESCENT BAY BLVD**
CITY-ST-ZIP **CLERMONT FL 34711**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **MGRM**
STREET ADDRESS **NARCISCO STEPHEN**
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CITY-ST-ZIP

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: **[Signature]** DATE **08/14/05** (352) 250 8604
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #

~~#~~ ATTACHMENT 1818 SEEDLING COURT
#L0400008289 CLERMONT
FLORIDA
14019279 FL 34711
CELL 352 2508604
08/15/05.

Dear Sir - madam,

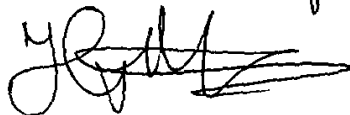
This is the first time I have
filed in this Report.

I believe I have filed in No 9
by mistake however I have sent it in as time
is running out.

I have deleted The Flooring Store Inc as
Registered agent as we do not own this store
anymore.

And added MGRM Stephen Narciso.

A check for \$55.00 is included.

Yours Sincerely


P.S.

If there is any problems please could you
send correspondence to the above address.
Thank you.