2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000082683

City-St-Zip: PENSACOLA, FL 32526 US

Entity Name: ROBERT BROWN CARPENTRY LLC

FILED Sep 10, 2009 Secretary of State

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Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	ENTS AVENUE DLA, FL 32526	US				
Current M	lailing Address:	:	New Mailii	ng Addres	ss:	
	ENTS AVENUE DLA, FL 32526	US				
		FEI Number Applied For () 2)(b), F.S., the limited liability	FEI Number Not Appli company did not receive the		Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address	of New Registered Agent:	
5491 REG PENSACC	ROBERT J ENTS AVENUE DLA, FL 32526 named entity sul	US bmits this statement for th	ne purpose of changing it	ts registere	ed office or registered agent, or both	
	e of Florida.		pp		- a a - a - a - a - a - a - a	
SIGNATUR	RE:					
	Electronic	Signature of Registered	Agent		Date	
MANAGING	MEMBERS/MANAGI	ERS:	ADDITIONS/C	CHANGES:		
Title: Name: Address: City-St-Zip:	MR. () DO BROWN, ROBER 5491 REGENTS A PENSACOLA, FL	T J AVENUE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () DO GOFF, JAMES DA 5491 REGENTS A PENSACOLA, FL	ARRYL AVENUE	Title: Name: Address: City-St-Zip:		() Change() Addition	
Title: Name: Address:	MGRM () DO BROWN, ROBER 5491 REGENTS A	T JAMES	Title: Name: Address:		(X) Change()Addition ES SHERMAN ENTS AVENUE	

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.

City-St-Zip: PENSACOLA, FL 32526 US

SIGNATURE: ROBERT JAY BROWN PRES 09/10/2009