

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087998

Entity Name: SIMPLY RUGS, LLC

FILED
Apr 11, 2007
Secretary of State

Current Principal Place of Business:

18700 VETERANS BLVD
SUITE 1
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

Current Mailing Address:

2446 DONGOLA ST
NORTH PORT, FL 34286

New Mailing Address:

3883 MAGARA TER.
NORTH PORT, FL 34287

FEI Number: 20-2039844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATES, DON
2446 DONGOLA ST
NORTHPORT, FL 34286 US

Name and Address of New Registered Agent:

BATES, DONNA
3883 MAGARA TER.
NORTHPORT, FL 34287 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: DONNA M. BATES

04/11/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BATES, DONALD J
Address: 2446 DONGOLA ST
City-St-Zip: NORTH PORT, FL 34286

Title: MGRM () Delete
Name: DONNA, BATES M
Address: 3883 MAGARA TERR
City-St-Zip: NORTH PORT, FL 34287

Title: MGRM () Delete
Name: BATES, DANIEL J
Address: 1468 ALLEGHENY RD
City-St-Zip: NORTH PORT, FL 34286

Title: MGRM () Delete
Name: BATES, BRIAN A
Address: 1468 ALLEGHENY RD
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BATES, DONNA M
Address: 3883 MAGARA TER
City-St-Zip: NORTH PORT, FL 34287

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 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: DONNA M. BATES

MGR

04/11/2007

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