2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# L05000012414

Entity Name: ARTISAN TILE, LLC

Current Principal Place of Business:

418 LAFAYETTE STREET
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

418 LAFAYETTE STREET
PORT ORANGE, FL 32127

New Mailing Address:

FEI Number: 20-2305805 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PITTS, ALLAN B
418 LAFAYETTE STREET
PORT ORANGE, FL 32127 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/MANAGERS:

Title: MGRM ( ) Delete
Name: PITTS, ALLAN B
Address: 418 LAFAYETTE STREET
City-St-Zip: PORT ORANGE, FL 32127

Title: MGR ( ) Delete
Name: CHISHOLM, WILLIAM
Address: 156 SPRUCE ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition
Name: CHISHOLM, WILLIAM C
Address: 156 SPRUCE ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: ALLAN B. PITTS MGRM 04/24/2008

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