

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000034677

FILED
Jan 20, 2007
Secretary of State

Entity Name: B & M FRAMING LLC

Current Principal Place of Business:

2615 WEDGEFIELD BLVD
JACKSONVILLE, FL 32211 US

New Principal Place of Business:

Current Mailing Address:

2615 WEDGEFIELD BLVD
JACKSONVILLE, FL 32211 US

New Mailing Address:

FEI Number: 20-2649423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

XPRESS EFILE INC
1511 PENMAN RD
STE B
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

RIST, MARCUS P
2615 WEDGEFIELD BLVD
JACKSONVILLE, FL 32211 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: MARCUS RIST

01/20/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RIST, MARCUS P
Address: 2615 WEDGEFIELD BLVD
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: MGRM () Delete
Name: WILLIAM, LIND
Address: 3117 SAN SAVADOR AVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: MGRM () Delete
Name: FORBES, DANIEL N
Address: 1304 7TH ST NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

ADDITIONS/CHANGES:

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: MARCUS P RIST

MGR

01/20/2007

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