-- 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000041689

1. Entity Name

TNT CUSTOM CARPENTRY & MAINTENANCE, LLC



FILED Mar 19, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

6808 12TH AVENUE NW BRADENTON, FL 34209 6808 12TH AVENUE NW BRADENTON, FL 34209

US



03152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	 Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

KUIKEN, TIMOTHY P 6808 12TH AVENUE NW BRADENTON, FL 34209

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	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accep		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE		
FI De	iling Fee is \$50.00 ue by May 1, 2007				
).	MANAGING MEMBERS/MANAGERS				
ITLE IAME STREET ADDRESS STY-ST-ZIP	MGR KUIKEN, TIMOTHY P 6808 12TH AVENUE NW BRADENTON, FL 34209		U00000673916 03/29/07-80048-013 50.00		
ITLE IAME ITREET ADDRESS ITY-ST-ZIP			03/29/07-80048-013 50.00		
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ITLE AME TREET ADDRESS HTY-ST-ZIP		IN	IN THIS SPACE		
ITLE IAME Itreet address Ity-st-zip					

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 eath; that I am a managing member or manager of the limited liability company or the receiver or true empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 4

TITLE

STREET ADDRESS CITY-ST-ZIP

PRINTED NAME OF A SULPANIA MANAGER NEMBER, OR AUTHORIZED REPRESENTAT

My P. KuiKEN

2/16/07 941-704-601

Daytime Phone #