2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000049315

Entity Name: ADVENT CUSTOM CABINETRY, LLC

FILED Feb 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

23392 KIM AVENUE 23330 HARBORVIEW RD

PORT CHARLOTTE, FL 33954 PORT CHARLOTTE, FL 33980 US

Current Mailing Address: New Mailing Address:

23392 KIM AVENUE 23330 HARBORVIEW RD

PORT CHARLOTTE, FL 33954 PORT CHARLOTTE, FL 33980 US

FEI Number: 14-1930429 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

ROSE, GERALD W
23330 HARBORVIEW RD

4TH FLOOR PORT CHARLOTTE, FL 33980 US MIAMI, FL 33145 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: GERALD W ROSE 02/01/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 ROSE, GERALD W
 Name:
 ROSE, GERALD W

 Address:
 23392 KIM AVENUE
 Address:
 23392 KIM AVENUE

City-St-Zip: PORT CHARLOTTE, FL 33954 City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: ST (X) Delete Title: () Change () Addition

 Name:
 ROSE, GERALD W
 Name:

 Address:
 23392 KIM AVENUE
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33954
 City-St-Zip:

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: GERALD W ROSE MGR 02/01/2008