

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055579

Entity Name: FIREPLACES PLUS, L.L.C.

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

240 SOUTHRIDGE INDUSTRIAL DRIVE
TAVARES, FL 32778

New Principal Place of Business:

Current Mailing Address:

3790 N. HWY 441
OCALA, FL 34475

New Mailing Address:

FEI Number: 20-3129197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWEN, PATSY J
3790 N. U.S. HIGHWAY 441
OCALA, FL 34475 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: BOWEN, PATSY J
Address: 3790 N. US HWY 441
City-St-Zip: OCALA, FL 34475

Title: MGM () Delete
Name: MANSITO, NICOLAS JR
Address: 3790 N. HWY 441.
City-St-Zip: OCALA, FL 34475

Title: MGM () Delete
Name: CONANT, THOMAS
Address: 240 SOUTHRIDGE INDUSTRIAL DR.
City-St-Zip: TAVARES, FL 32788

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 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: PATSY BOWEN

MGM

04/21/2008

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