


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90108 046 ****50.00

DOCUMENT # L05000111643					
1. Entity Name TRIM CARPENTERS LLC					
Principal Place of Business 4646 N.E DUDLEY CIRCLE JENSEN BEACH, FL 34957			Mailing Address 4646 N.E DUDLEY CIRCLE JENSEN BEACH, FL 34957		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.:		Suite, Apt. #, etc.:			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 01072006 Chg-LLC CR2E083 (11/05) 16-1742515	
5. Certificate of Status Desired				Applied For Not Applicable	
6. Name and Address of Current Registered Agent HARNAGE, KENNETH 4646 N.E DUDLEY CIRCLE JENSEN BEACH, FL 34957				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HARNAGE, KENNETH 4646 N.E DUDLEY CIRCLE JENSEN BEACH, FL 34957		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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: <i>Kenneth L Harnage</i> KENNETH L HARNAGE				772-370-6930	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				<small>Date Daytime Phone #</small>	