## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000116660

1. Entity Name

YANKEE CARPENTRY, LLC



Principal Place of Business

3216 CARY WAY SARASOTA, FL 34232 Mailing Address

3216 CARY WAY SARASOTA, FL 34232

**FILED** Feb 28, 2007 08:00 AN Secretary of State



CR2E083 (11/05)

02192007 No Chg-LLC DO NOT WRITE IN THIS SPACE

Applied For 4. FEI Number 13-4320732 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

HAMBLET, DOUGLAS 3216 CARY WAY SARASOTA, FL 34232

## DO NOT WRITE IN THIS SPACE

| 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_  | Signature, typed or printed name of registered agent and title if applicable. | (NOTE: Registered Agent signature required when | renstating) DATE ,   |
| Filing Fee is \$50.00<br>Due by May 1, 2007   |   | · · · · · · · · · · · · · · · · · · ·           |  |
| 9.  | MANAGING MEMBERS/MANAGERS   |   |  |
| TITLE NAME STREET ADDRESS   | MGRM<br>HAMBLET, DOUGLAS<br>3216 CARY WAY                                     | 43  | e de la companya de<br>La companya de la co  |
| CITY-SI-ZIP   | SARASOTA, FL 34232  | ,   | $\label{eq:continuous} (x,y) = (x,y) + (x,y) $ |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   |   | 000000651305<br>03/09/07-80002-008 50.00   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   | :.  | DO NOT WRITE   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   |   | IN THIS SPACE  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | ·   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS   | ,   |   |  |

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 trustee errowwered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE