

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016595

FILED
Apr 09, 2009
Secretary of State

Entity Name: SIGNATURE CABINETRY & DESIGN, LLC

Current Principal Place of Business:

11891 US HIGHWAY ONE, SUITE 103
NORTH PALM BEACH, FL 33480

New Principal Place of Business:

11811 US HIGHWAY ONE, SUITE 104
NORTH PALM BEACH, FL 33480

Current Mailing Address:

2000 PGA BOULEVARD, SUITE 2204
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 41-2195351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE
SUITE 1100
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

WHITLEY, KENNETH A V
11811 US HWY 1
SUITE 104
NORTH PALM BEACH, FL 33408 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: KENNETH A. WHITLEY

04/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: WHITLEY, ROBERT B
Address: 2000 PGA BLVD STE 2204
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: V () Delete
Name: WHITLEY, KENNETH A
Address: 2000 PGA BLVD STE 2204
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES:

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: KENNETH A. WHITLEY

V

04/09/2009

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