

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016804

FILED
Jun 19, 2009
Secretary of State

Entity Name: DAVE WILLIAMS FLOOR COVERINGS, LLC

Current Principal Place of Business:

613 MOCKINGBIRD LANE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

613 MOCKINGBIRD LANE
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 20-4310550 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BETH-ANN SCHULMAN, LLC
203 E. THIRD STREET
SUITE 101
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

OUR TAX ACCOUNTANT, INC.
499 N. SR 434, SUITE 1051
ALTAMONTE SPRINGS, FL 32714 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: DAVE WILLIAMS

06/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WILLIAMS, DAVID J
Address: 613 MOCKINGBIRD LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES:

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: DAVE WILLIAMS

MGR

06/19/2009

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