## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000017719

Entity Name: LYNN ARMSTRONG CUSTOM WOOD FLOORS, LLC

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

4250 HIGHWAY AVE. SUITE 4 4250 HIGHWAY AVE. SUITE 4 SUITE 4 SUITE 4

SUITE 4 JACKSONVILLE, FL 32254

Current Mailing Address: New Mailing Address:

4250 HIGHWAY AVE. SUITE 4 4250 HIGHWAY AVE.

JACKSONVILLE, FL 32254 SUITE 4

JACKSONVILLE, FL 32254

FEI Number: 20-4291739 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARMSTRONG, EVELYN O 2517 BEGONIA DRIVE MIDDLEBURG, FL 32068 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:

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ARMSTRONG, EVELYN O
 Name:

 Address:
 2517 BEGONIA DRIVE
 Address:

 City-St-Zip:
 MIDDLEBURG, FL 32068
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ARMSTRONG, RAY L JR
 Name:

 Address:
 2517 BEGONIA DRIVE
 Address:

 City-St-Zip:
 MIDDLEBURG, FL 32068
 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: EVELYN O. ARMSTRONG MGRM 04/24/2009