

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037917

FILED
Jul 06, 2007
Secretary of State

Entity Name: LINDA'S QUALITY FURNITURE, LLC

Current Principal Place of Business:

1200 GEORGIA AVENUE
ST CLOUD, FL 34769 US

New Principal Place of Business:

1125 NEW YORK AVENUE
ST CLOUD, FL 34769 US

Current Mailing Address:

1200 GEORGIA AVENUE
ST CLOUD, FL 34769 US

New Mailing Address:

1125 NEW YORK AVENUE
ST CLOUD, FL 34769 US

FEI Number: 03-0494324 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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: MORGAN, JOHN F JR
Address: 220 ILLINOIS AVENUE
City-St-Zip: ST CLOUD, FL 34769 US

Title: MGRM () Delete
Name: DAVIS, LINDA M
Address: 220 ILLINOIS AVENUE
City-St-Zip: ST CLOUD, FL 34769 US

Title: MGRM () Delete
Name: MCNUTT, FRANCISCA M
Address: 4212 LAVENDER WAY
City-St-Zip: ST CLOUD, FL 34772 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MORGAN, JOHN F JR
Address: 425 NEW YORK AVENUE
City-St-Zip: ST CLOUD, FL 34769 US

Title: MGRM (X) Change () Addition
Name: DAVIS, LINDA M
Address: 425 NEW YORK AVENUE
City-St-Zip: ST CLOUD, FL 34769 US

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: LINDA M DAVIS

M

07/06/2007

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