

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90122 043 ***138.75

DOCUMENT # L06000053068

1. Entity Name
BTK CABINETRY, LLC



Principal Place of Business
20653 SABAL STREET
ORLANDO, FL 32833

Mailing Address
20653 SABAL STREET
ORLANDO, FL 32833

60061100



DO NOT WRITE IN THIS SPACE

03052008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number

20-4937086

Applied For

~~59-9648343~~

Not Applicable

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

KREBS, BRENT
20653 SABAL STREET
ORLANDO, FL 32833

**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 reappointing)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
KREBS, BRENT
20653 SABAL STREET
ORLANDO, FL 32833

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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 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:

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

4/8/08 407-722-1961

Date

Daytime Phone #