2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000055333

1. Entity Name CADTECH DRAFTING, LLC



Principal Place of Business

555 WEST GRANADA BOULEVARD SUITE D8 ORMOND BEACH, FL 32174 US Mailing Address

555 WEST GRANADA BOULEVARD SUITE D8

ORMOND BEACH, FL 32174 US

FILED Apr 18, 2008 08:00 A Secretary of State



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04142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4979825

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, ANDREW R 555 WEST GRANADA BOULEVARD SUITE D8 ORMOND BEACH, FL 32174

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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 reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 000000906563 05/05/08-80003-012 138.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SMITH, ANDREW R STE D8, 555 WEST GRANADA BOULEVARD ORMOND BEACH, FL 32174	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY ST-2IP		
TITLE NAME STREET ADDRESS CITY-SI-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the ex-		

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11. I nereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes 1 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:

Adu R. Site

ANDREW

& SMITH

4.14.200

386.506.9039

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

Date

Daytime Prione #