

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066157

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: SHAWN CINADER CUSTOM TRIM LLC

**Current Principal Place of Business:**

205 HAWTHORNE AVENUE  
LADY LAKE, FL 32159

**New Principal Place of Business:**

**Current Mailing Address:**

205 HAWTHORNE AVENUE  
LADY LAKE, FL 32159

**New Mailing Address:**

FEI Number: 52-2423162

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSTON, JANICE  
205 HAWTHORNE AVENUE  
LADY LAKE, FL 32159 US

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

CINADER, JANICE L MGRM  
205 HAWTHORNE AVENUE  
LADY LAKE, FL 32159 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: JANICE L CINADER

04/24/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CINADER, SHAWN  
Address: 205 HAWTHORNE AVENUE  
City-St-Zip: LADY LAKE, FL 32159

Title: MGRM (X) Delete  
Name: CINADER, JANICE L  
Address: 205 HAWTHORNE AVENUE  
City-St-Zip: LADY LAKE, FL 32159

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CINADER, SHAWN M MGR  
Address: 205 HAWTHORNE AVE.  
City-St-Zip: LADY LAKE, FL 32159

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: JANICE L CINADER

MGRM

04/24/2008

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