

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000072997

FILED
Aug 31, 2008
Secretary of State

Entity Name: POWERS TRIM LLC

Current Principal Place of Business:

214-A SAN VINCENTE STREET
SUITE C
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

2374 CORINTH ROAD
PONCE DE LEON, FL 32455

Current Mailing Address:

214-A SAN VINCENTE STREET
SUITE C
PANAMA CITY BEACH, FL 32413

New Mailing Address:

3000 SHILLINGLAW ROAD
YORK, SC 29745

FEI Number: 20-5247065 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:

POWERS, JASON
214-A SAN VINCENTE STREET
APT C
PANAMA CITY BEACH, FL 32413 US

Name and Address of New Registered Agent:

POWERS, JASON
2374 CORINTH ROAD
PONCE DE LEON, FL 32455 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:

08/31/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: POWERS, JASON
Address: 214-A SAN VINCENTE STREET
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGR () Delete
Name: POWERS, JASON
Address: 214 SAN VINCENTE ST APT C
City-St-Zip: PANAMA CITY BEACH, FL 32413

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: POWERS, JASON
Address: 2374 CORINTH ROAD
City-St-Zip: PONCE DE LEON, FL 32455

Title: MGR (X) Change () Addition
Name: POWERS, JASON
Address: 3000 SHILLINGLAW ROAD
City-St-Zip: YORK, SC 29745

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: JASON POWERS

MGR

08/31/2008

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