

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000078661

FILED  
May 10, 2007  
Secretary of State

**Entity Name:** MONARCH KITCHEN AND BATH DESIGN LLC

**Current Principal Place of Business:**

1621 PALM AVE.  
WINTER PARK, FL 32789

**New Principal Place of Business:**

1802 N. ORANGE AVE  
ORLANDO, FL 32804

**Current Mailing Address:**

1621 PALM AVE.  
WINTER PARK, FL 32789

**New Mailing Address:**

1802 N. ORANGE AVE.  
ORLANDO, FL 32804

FEI Number: 20-5445672      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:**

RADER, CAROLINE M  
1621 PALM AVE.  
WINTER PARK, FL 32789      US

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

RADER, CAROLINE M  
1802 N. ORANGE AVE  
ORLANDO, FL 32804      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: CAROLINE M. RADER

05/10/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: RADER, CAROLINE M  
Address: 1621 PALM AVE  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: RADER, CAROLINE M  
Address: 1802 N. ORANGE AVE  
City-St-Zip: ORLANDO, FL 32804

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: CAROLINE M. RADER

MGR

05/10/2007

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