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2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State
04-23-2007 90355 034 ****50.00

DOCUMENT # L06000086047

1. Entity Name
KITCHEN CABINETS & BEYOND LLC

Principal Place of Business	Mailing Address
692 ENTERPRISE AVENUE LECANTO, FL 34461	692 ENTERPRISE AVENUE LECANTO, FL 34461

04182007 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
4487 N. LECANTO HWY	4487 N. LECANTO HWY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BEVERLY HILLS FL	City & State: BEVERLY HILLS FL
Zip: 34465 Country: US	Zip: 34465 Country: US

4. FEI Number: 20-5560923 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ECCHER, GARY 692 ENTERPRISE AVENUE LECANTO, FL 34461	Name: SUSANNE HILL Street Address (P.O. Box Number is Not Acceptable): 4487 N. LECANTO HIGHWAY City: BEVERLY HILLS FL Zip Code: 34465

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: SUSANNE HILL Susanne Hill 4/18/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2007

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ECCHER, GARY 692 ENTERPRISE AVENUE LECANTO, FL 34461	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM SUSANNE HILL 4487 N. LECANTO HWY BEVERLY HILLS, FL 34465	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM DERKACH, ALLAN J 692 ENTERPRISE AVENUE LECANTO, FL 34461	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MICKEY HILL MGRM 4487 N. LECANTO HWY BEVERLY HILLS, FL 34465	☐ Change ☑ Addition MGRM
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM CHRISTOPHER DURHAM 4487 N. LECANTO HWY BEVERLY HILLS FL 34465	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 605, Florida Statutes.

SIGNATURE: Susanne Hill SUSANNE HILL 4/18/07 352 527 1237
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #