2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# L06000087889

Entity Name: CH DRAFTING SERVICES, LLC

Current Principal Place of Business:

1201 VERMONT AVE.
SAINT CLOUD, FL 34769

New Principal Place of Business:

4209 SETTLERS COURT
SAINT CLOUD, FL 34772

Current Mailing Address:

PO BOX 702559
SAINT CLOUD, FL 347702559

New Mailing Address:

FEI Number: 20-5516914 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARVEY, ALICIA J
4209 SETTLERS CT.
SAINT CLOUD, FL 34772 US

Name and Address of New Registered Agent:

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: ______________________________

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HARVEY, ALICIA J
Address: 4209 SETTLERS CT.
City-St-Zip: SAINT CLOUD, FL 34772

Title: MGRM ( ) Delete
Name: CARVER, JOHN J III
Address: 518 WILDFORREST DRIVE
City-St-Zip: DAVENPORT, FL 33837

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ALICIA J HARVEY MM 04/28/2008

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