

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088710

FILED
Apr 27, 2009
Secretary of State

Entity Name: CRAFTSMAN'S CORNER LLC

Current Principal Place of Business:

920 HARBOR LAKE DR
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

7370 124TH AVENUE NORTH
LARGO, FL 33773

New Mailing Address:

PO BOX 914
SAFETY HARBOR, FL 34695

FEI Number: 22-3942519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: MGR () Delete
Name: SPEAR, JAMES R
Address: 7370 124TH AVENUE NORTH
City-St-Zip: LARGO, FL 33773

Title: ST () Delete
Name: SPEAR, BONITA S
Address: 7370 124TH AVENUE NORTH
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SPEAR, JAMES R
Address: PO BOX 914
City-St-Zip: SAFETY HARBOR, FL 34695

Title: ST (X) Change () Addition
Name: SPEAR, BONITA S
Address: PO BOX 914
City-St-Zip: SAFETY HARBOR, FL 34695

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: BONITA S SPEAR

ST

04/27/2009

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