

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000092558

Entity Name: BUILDERS INVENTORY LLC

FILED
Sep 17, 2009
Secretary of State

Current Principal Place of Business:

700 SPRING OAK DR.
MELBOURNE, FL 32901

New Principal Place of Business:

108 TROPIC PLACE
ROCKLEDGE, FL 32955 US

Current Mailing Address:

700 SPRING OAK DR.
MELBOURNE, FL 32901

New Mailing Address:

108 TROPIC PLACE
ROCKLEDGE, FL 32955

FEI Number: 20-5578253 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:

PARSONS, STEVEN E
700 SPRING OAK DR.
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

PARSONS, STEVEN E
108 TROPIC PLACE
ROCKLEDGE, FL 32955 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:

09/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: OWNE () Delete
Name: PARSONS, STEVEN E OWNER
Address: 700 SPRING OAK
City-St-Zip: MELBOURNE, FL 32901 US

ADDITIONS/CHANGES:

Title: OWNE (X) Change () Addition
Name: PARSONS, STEVEN E OWNER
Address: 108 TROPIC PLACE
City-St-Zip: ROCKLEDGE, FL 32955 US

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: STEVEN E. PARSONS

OWN

09/17/2009

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