

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094559

**FILED**  
**Apr 16, 2007**  
**Secretary of State**

**Entity Name:** COLBY VANDERGRIFT FRAMING, L.L.C.

**Current Principal Place of Business:**

1613 WOODACRES CT.  
PORT ORANGE, FL 321286912

**New Principal Place of Business:**

1613 WOODACRES CT.  
PORT ORANGE, FL 32128

**Current Mailing Address:**

1613 WOODACRES CT.  
PORT ORANGE, FL 321286912

**New Mailing Address:**

1613 WOODACRES CT.  
PORT ORANGE, FL 32128

FEI Number: 56-2612933

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BEAZLEY, EDWARD H JR.  
221 NORTH CAUSEWAY  
NEW SMYRNA BEACH, FL 32169 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: VANDERGRIFT, COLBY  
Address: 1613 WOODACRES CT.  
City-St-Zip: PORT ORANGE, FL 321286912

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VANDERGRIFT, COLBY  
Address: 1613 WOODACRES CT.  
City-St-Zip: PORT ORANGE, FL 32128

I hereby certify that the information supplied with this filing does not qualify for the 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: COLBY H VANDERGRIFT

MGRM

04/16/2007

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