

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099001

FILED
Aug 22, 2007
Secretary of State

Entity Name: TOM KERSHAW TILE INSTALLATIONS LLC

Current Principal Place of Business:

8156 LUCENA ST
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

8156 LUCENA ST
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 03-0607777 **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:

KERSHAW, THOMAS E
8156 LUCENA ST
NAVARRE, FL 32566 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: KERSHAW, THOMAS E
Address: 8156 LUCENA ST
City-St-Zip: NAVARRE, FL 32566

Title: MGRM () Delete
Name: CIMINO, DARLENE C
Address: 8156 LUCENA ST
City-St-Zip: NAVARRE, FL 32566

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGR () Change (X) Addition
Name: CASHMAN, DEIDRIE M
Address: 8525 LOREDO ST
City-St-Zip: NAVARRE, FL 32566

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: THOMAS E KERSKAW

MGR

08/22/2007

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