

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000101692

FILED
Aug 19, 2007
Secretary of State

Entity Name: CUSTOM CRAFT CARPENTRY LLC

Current Principal Place of Business:

2705 OLD SCENIC HWY. 98 EAST
UNIT # 26
DESTIN, FL 32541

New Principal Place of Business:

91 BAMBI PL.
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

2705 OLD SCENIC HWY. 98 EAST
UNIT # 26
DESTIN, FL 32541 US

New Mailing Address:

PO BOX 9309
MIRAMAR BEACH,, FL 32550 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

WHITEHEAD, EDWARD S
2705 OLD SCENIC HWY. 98 EAST
UNIT # 26
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

WHITEHEAD, EDWARD S
91 BAMBI PL.
SANTA ROSA BEACH, FL 32459 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: EDWARD S WHITEHEAD

08/19/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WHITEHEAD, EDWARD S
Address: 2705 OLD SCENIC HWY. 98 EAST UNIT # 26
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WHITEHEAD, EDWARD S
Address: 91 BAMBI PL.
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: EDWARD S WHITEHEAD

MGR

08/19/2007

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