

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000122977

FILED  
May 05, 2011  
Secretary of State

Entity Name: CUSTOM WORKS LLC

**Current Principal Place of Business:**

9197-C SUNTERRACE CIRCLE  
PALM BEACH GARDENS, FL 33403 US

**New Principal Place of Business:**

5120 NICHOLAS DR  
WEST PALM BEACH, FL 33417 US

**Current Mailing Address:**

9197-C SUNTERRACE CIRCLE  
PALM BEACH GARDENS, FL 33403 US

**New Mailing Address:**

5120 NICHOLAS DR  
WEST PALM BEACH, FL 33417 US

FEI Number: 11-3800407

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FITZGERALD, NICOLE  
9197-C SUNTERRACE CIRCLE  
PALM BEACH GARDENS, FL 33403 US

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

FITZGERALD, NICOLE  
5120 NICHOLAS DR  
WEST PALM BEACH, FL 33417 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:

05/05/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FITZGERALD, NICOLE  
Address: 5120 NICHOLAS DR  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: MGRM  
Name: FITZGERALD, KENNETH  
Address: 5120 NICHOLAS DR  
City-St-Zip: WEST PALM BEACH, FL 33417 US

I hereby 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: NICOLE FITZGERALD

MGRM

05/05/2011

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