2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000024682

Entity Name: C.M.W. INTERIOR SERVICES LLC

FILED Jun 10, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

901 SW HAAS AVENUE 1150 SW HIBISCUS ST PORT ST LUCIE, FL 34953 PORT ST LUCIE, FL 34983

Current Mailing Address: New Mailing Address:

901 SW HAAS AVENUE 1150 SW HIBISCUS ST PORT ST LUCIE, FL 34953 PORT ST LUCIE, FL 34983

FEI Number: 26-0732464 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: Name and Address of New Registered Agent:

WAHL, CRAIG WAHL, CRAIG M
1150 SW HIBISCUS STREET
PORT ST LUCIE, FL 34983 US
WAHL, CRAIG M
1150 SW HIBISCUS STREET
PORT ST LUCIE, FL 34983 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: CRAIG M WAHL 06/10/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WAHL, CRAIG
Address: 901 SW HAAS AVENUE

Address: 901 SW HAAS AVENUE City-St-Zip: PORT ST LUCIE, FL 34953

 Title:
 MGR () Delete

 Name:
 GREEN, JEFFREY A

 Address:
 901 SW HAAS AVENUE

 City-St-Zip:
 PORT ST LUCIE, FL 34953

Title: MGRM () Delete Name: WILLIAMS, GRADY C

Address: WILLIAMS, GRADY C
416 CRABAPPLE COVE
City-St-Zip: PORT ST LUCIE, FL 34986

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: WAHL, CRAIG M
Address: 1150 SW HIBISCUS ST.
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGR (X) Change () Addition

 Name:
 GREEN, JEFFREY A

 Address:
 1150 SW HIBISCUS ST.

 City-St-Zip:
 PORT ST LUCIE, FL 34953

Title: () Change () Addition

Name: Address: City-St-Zip:

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: CRAIG M. WAHL MGMR 06/10/2008