2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000034777

Entity Name: SEACOAST CABINET DESIGN LLC

138 SW MILBURN CIRCLE

City-St-Zip: PORT SAINT LUCIE, FL 349535506 US

Address:

FILED Jul 09, 2008 Secretary of State

| Current P | rincipal Place of Business: | New Principal Place of Bu | ısiness: |
|---|---|--|----------------------------------|
| | JACK JAMES DRIVE FL 34997 US | | |
| Current N | lailing Address: | New Mailing Address: | |
| | JACK JAMES DRIVE FL 34997 US | | |
| In accordan | | lity company did not receive the prior notice. | ertificate of Status Desired () |
| Name and | l Address of Current Registered Age | nt: Name and Address of Nev | v Registered Agent: |
| 7982 SW . | JOSEPH P JACK JAMES DR. FL 34997 US | | |
| | e named entity submits this statement fo e of Florida. | or the purpose of changing its registered offic | e or registered agent, or both |
| SIGNATUI | RE: | | |
| | Electronic Signature of Registere | ed Agent | Date |
| MANAGING MEMBERS/MANAGERS: | | ADDITIONS/CHANGES: | |
| Title: Name: Address: City-St-Zip: | MGRM () Delete KELLER, JOSEPH P 7980 SW JACK JAMES DRIVE STUART, FL 34997 US | Title: () Ch Name: Address: City-St-Zip: | nange()Addition |
| Title: Name [:] | MGRM () Delete | Title: () Ch | nange()Addition |

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: KATE GALLAGHER SEC 07/09/2008