

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055858

**FILED**  
**Jun 16, 2009**  
**Secretary of State**

**Entity Name:** FOSTER CUSTOM TRIM, LLC.

**Current Principal Place of Business:**

1609 CYPRESS STREET  
PENSACOLA, FL 32501

**New Principal Place of Business:**

2706 GLEN OAK CIRCLE  
GULF BREEZE, FL 32563

**Current Mailing Address:**

1609 CYPRESS STREET  
PENSACOLA, FL 32501

**New Mailing Address:**

2706 GLEN OAK CIRCLE  
GULF BREEZE, FL 32563

**FEI Number:** 26-0257946      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

FOSTER, ANDREW M  
1609 CYPRESS STREET  
PENSACOLA, FL 32501      US

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

FOSTER, ANDREW M  
2706 GLEN OAK CIRCLE  
GULF BREEZE, FL 32563      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:** ANDREW FOSTER

06/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM      ( ) Delete  
**Name:** FOSTER, ANDREW M  
**Address:** 1609 CYPRESS STREET  
**City-St-Zip:** PENSACOLA, FL 32501

**ADDITIONS/CHANGES:**

**Title:** MGRM      (X) Change      ( ) Addition  
**Name:** FOSTER, ANDREW M  
**Address:** 2706 GLEN OAK CIRCLE  
**City-St-Zip:** GULF BREEZE, FL 32563

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:** ANDREW FOSTER

MGRM

06/16/2009

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