2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000069356

Entity Name: FLORIDA CABINETRY, LLC

FILED Apr 17, 2008 Secretary of State

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

1469 N. MAGNOLIA AVE UNIT H 1469 N. MAGNOLIA AVE

OCALA, FL 34475 US OCALA, FL 34475

Current Mailing Address: New Mailing Address:

17385 SW 38 AVE ROAD OCALA, FL 34473 US

FEI Number: 26-0499263 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FISCHER, PORTER M FISCHER, GARY R

17385 SW 38 AVE ROAD 17385 SW 38 AVE ROAD OCALA, FLORIDA, FL 34473 US OCALA, FLORIDA, FL 34473 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: GARY R. FISCHER 04/17/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 FISCHER, PORTER M
 Name:
 FISCHER, GARY R

 Address:
 17385 SW 38 AVE ROAD
 Address:
 17385 SW 38 AVE ROAD

 City-St-Zip:
 OCALA, FL 34473 US
 City-St-Zip:
 OCALA, FL 34473 US

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 FISCHER, GARY R
 Name:

 Address:
 17385 SW 38 AVE ROAD
 Address:

 City-St-Zip:
 OCALA, FL 34473 US
 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: GARY R. FISCHER MMGR 04/17/2008