

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000084231

FILED
Mar 13, 2009
Secretary of State

Entity Name: CLASSIC DOORS OF NORTHEAST FLORIDA LLC

Current Principal Place of Business:

5971-6 PPOWERS AVE.
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

5971-6 PPOWERS AVE.
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 26-0731043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADILLA, ROBERT J
5971-6 POWERS AVE
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PADILLA, ROBERT J
Address: 5971-6 POWERS AVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: MGRM () Delete
Name: JONES, ALICIA E
Address: 7010 ROUNDEAF DR.
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGR (X) Delete
Name: ALONZO, ERNESTO
Address: 4625 REDWOOD AVE
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT PADILLA

MGRM

03/13/2009

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