

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000043771

FILED
Jun 21, 2009
Secretary of State

Entity Name: QUALITY CUSTOM CABINETS BY JERRY "LLC"

Current Principal Place of Business:

1991 BARRINGTON DR N
CLEARWATER, FL 33763

New Principal Place of Business:

Current Mailing Address:

1991 BARRINGTON DR N
CLEARWATER, FL 33763

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

MCGUIRE, GERALD P JR
1991 BARRINGTON DR N
CLEARWATER, FL 33763 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: MGR Delete
Name: GERALD, MCGUIRE JR
Address: 1991 BARRINGTON DR
City-St-Zip: CLEARWATER, FL 33763

Title: MGRM Delete
Name: GRIFITH, DAVID
Address: 5709 17TH AVE S
City-St-Zip: GULF PORT, FL 33705

ADDITIONS/CHANGES:

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: GERALD MCGUIRE

MANA

06/21/2009

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