

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000108895

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** RALPH P MUNGO CUSTOM CABINETS, LLC

**Current Principal Place of Business:**

107 DUNBAR AVE  
F  
OLDSMAR, FL 34677

**New Principal Place of Business:**

435 DOUGLAS RD E  
OLDSMAR, FL 34677 UN

**Current Mailing Address:**

3177 LAKE PINE WAY  
C-2  
TARPON SPRINGS, FL 34688

**New Mailing Address:**

**FEI Number:** 27-1287946

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUNGO, RALPH P  
3177 LAKE PINE WAY  
C-2  
TARPON SPRINGS, FL 34688 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  
Name: MUNGO, RALPH P  
Address: 3177 LAKE PINE WAY C-2  
City-St-Zip: TARPON SPRINGS, FL 34688

I hereby 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: RALPH P MUNGO

MGRN

04/30/2012

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