

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000017975

Entity Name: GRANDE FINISHES LLC

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

934 N. UNIVERSITY DR.  
SUITE #265  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

934 N. UNIVERSITY DR.  
SUITE #265  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MCKEONE, BETH  
10368 NW 17TH ST  
CORAL SPRINGS, FL 33071 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: OLDAKOWSKI, GREG  
Address: 5697 NW CROTON AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: MGRM  
Name: GRIFFIS, JAMES  
Address: 10368 NW 17TH ST  
City-St-Zip: CORAL SPRINGS, FL 33071 US

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: JAMES GRIFFIS

MGRB

04/29/2011

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