

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000885

FILED
Mar 25, 2009
Secretary of State

Entity Name: MILLWORK SALES OF GEORGIA, LLC

Current Principal Place of Business:

335 RIVERSIDE PARKWAY, SW
SUITE 100
AUSTELL, GA 30136

New Principal Place of Business:

Current Mailing Address:

5555 TRIANGLE PARKWAY, SUITE 120
NORCROSS, GA 30092

New Mailing Address:

FEI Number: 58-2627758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRITT, ARNOLD D JR.
707 PENINSULAR PLACE
JACKSONVILLE, FL 32204 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: SUTHERLAND, CHARLES M JR.
Address: 335 RIVERSIDE PARKWAY, SW, SUITE 100
City-St-Zip: AUSTELL, GA 30136

Title: MGR () Delete
Name: SUTHERLAND, DAVID B
Address: 335 RIVERSIDE PARKWAY, SW, SUITE 100
City-St-Zip: AUSTELL, GA 30136

Title: MGR () Delete
Name: BRUCE, THOMAS A
Address: 3250 PARK CENTRAL BLVD, NORTH
City-St-Zip: POMPANO BEACH, FL 33064

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: CHARLES M SUTHERLAND

MGR

03/25/2009

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