

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001093

FILED
May 05, 2008
Secretary of State

Entity Name: STONE PROFILES (I), LLC

Current Principal Place of Business:

1127 POINSETTIA DRIVE
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

1127 POINSETTIA DRIVE
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 20-8192136 FEI Number Applied For () 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:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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: BOOTIER, HERALD
Address: 1127 POINSETTIA DRIVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: COLLINS, WILLIAM
Address: 1127 POINSETTIA DRIVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: CUNNINGHAM, DAVID
Address: 1127 POINSETTIA DRIVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: WEINBERG, RICHARD
Address: 1127 POINSETTIA DRIVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: CUTLER, BRUCE
Address: 1127 POINSETTIA DRIVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: BLYER, DAVID
Address: 1127 POINSETTIA DRIVE
City-St-Zip: DELRAY BEACH, FL 33444

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:

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: BRUCE CUTLER

P

05/05/2008

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