

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004098

Entity Name: EXACT MILLWORKS, LLC

FILED
Jun 26, 2009
Secretary of State

Current Principal Place of Business:

3825 PACES WALK, SUITE 350
ATLANTA, GA 30319

New Principal Place of Business:

700 NW 57TH COURT
FT LAUDERDALE, FL 33309

Current Mailing Address:

3825 PACES WALK, SUITE 350
ATLANTA, GA 30319

New Mailing Address:

700 NW 57TH COURT
FT LAUDERDALE, FL 33309

FEI Number: 26-3312915 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:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DRIVE, SUITE A
TALLAHASSEE, FL 32301 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 () Delete
Name: NANCY CREEK CAPITAL, LP
Address: 3825 PACES WALK, SUITE 350
City-St-Zip: ATLANTA, GA 30319

Title: MGRM () Delete
Name: NANCY CREEK CAPITAL QP, LP
Address: 3825 PACES WALK, SUITE 350
City-St-Zip: ATLANTA, GA 30319

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: KEITH MOSLEY

CEO

06/26/2009

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