


2<sup>nd</sup> and  
**FINAL NOTICE:** File on or before Sept. 30, 1998 or Limited Liability Company will be dissolved. If dissolved, minimum amount due to reinstate: \$688.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 SEP 14 PM 1:37

<b>FILING FEE</b> \$ 588.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>
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1. Name and Mailing Address of Limited Liability Company  <b>DOCUMENT # M97000000411</b>  <b>PLANTATION BLINDS, L.L.C.</b> <del>315 ROSS ROAD</del> <del>TALLAHASSEE FL 32310</del>
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1a. Principal Place of Business Address  315 ROSS ROAD TALLAHASSEE FL 32310
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2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip	2a. Mailing Address 3300 Canton Pike  Suite, Apt. #, etc.  City & State Hopkinsville, Kentucky  Zip 42240	Country USA
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3. Date Organized or Qualified 07/07/1997	3a. State of Formation KY
4. FEI Number 31-1538343	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent  CARTER, GLENN 1808 OLD BRIAR TRAIL TALLAHASSEE FL 32310
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8. Name and Address of New Registered Agent/Office  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc. 300002640673--3 -09/16/98--01036--001  City ***188.75 FL
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9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	GARDNER, DAVID M	330 CANTON PIKE	HOPKINSVILLE KY
MGR	GARDNER, MARK M	330 CANTON PIKE	HOPKINSVILLE KY
MGR	CARTER, GLENN	1808 OLD BRIAR TRAIL	TALLAHASSEE FL

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (l), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: Glenn Carter GLENN CARTER 8/26/98 942-8220  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #

2

**PLANTATION BLINDS, LLC**  
**3300 Canton Pike**  
**Hopkinsville, Kentucky 42240**

September 8, 1998

Florida Department of State  
Division of Corporations  
Registration Section  
P. O. Box 6327  
Tallahassee, Florida 32314

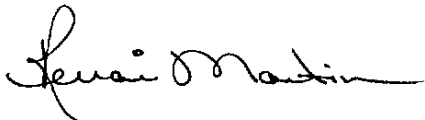
RE: M97000000411  
Plantation Blinds, LLC  
315 Ross Road  
Tallahassee, Florida 32310

Enclosed is the annual report with the fee for 1988. This was the first notice received by this office.

I have corrected the mailing address on the report so that future mailings will come to the home office, as there have been several instances of mailings not being received at the Ross Road location in Tallahassee.

Thank you for your consideration in this matter.

Sincerely,



Renai Martin  
Office Manager

cc: Glenn Carter