

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000173627

Entity Name: THOMAS CABINET INSTALLATION LLC

Current Principal Place of Business:

302 AVENIDA 23
PENSACOLA, FL 32561

Current Mailing Address:

902 CORTO DR.
PENSACOLA, FL 32561 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMAS, ZEKE K
302 AVENIDA 23
PENSACOLA, FL 32561 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

Authorized Person(s) Detail :

Title MGR
Name THOMAS, ZEKE K
Address 302 AVENIDA 23
City-State-Zip: PENSACOLA FL 32561

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ZEKE THOMAS

OWNER

04/27/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date