

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049612

FILED  
Jan 20, 2005  
Secretary of State

Entity Name: MELONEY PAINTING & REMODELING L.C.

**Current Principal Place of Business:**

1041 PLATEAU AVE.  
LAKELAND, FL 33815

**New Principal Place of Business:**

424 PINELLAS RD  
WINTERHAVEN, FL 33884

**Current Mailing Address:**

1041 PLATEAU AVE.  
LAKELAND, FL 33815

**New Mailing Address:**

424 PINELLAS RD  
WINTERHAVEN, FL 33884

FEI Number: 61-1447828

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MELONEY, MIKE K  
1041 PLATEAU AVE.  
LAKELAND, FL 33815 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: MELONEY, MIKE  
Address: 1041 PLATEAU AVE.  
City-St-Zip: LAKELAND, FL 33815

Title: MGR ( ) Delete  
Name: LOPEZ, ALFREDO  
Address: 1041 PLATEAU AVE.  
City-St-Zip: LAKELAND, FL 33815

Title: MGR ( ) Delete  
Name: MELONEY, GRAHAM  
Address: 219 JEREMY DRIVE  
City-St-Zip: DAVENPORT, FL 33837

Title: MGR (X) Delete  
Name: BEACH, BRIAN  
Address: 1701 COMMERCE AVE., LOT 226  
City-St-Zip: MOINSE CITY, FL 33844

Title: MGR ( ) Delete  
Name: TAYLOR, BILL  
Address: 80 COLMAN RD  
City-St-Zip: WINTERHAVEN, FL 33880

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIKE MELONEY

MGR

01/20/2005

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