

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000084823

**Entity Name:** ALAN WADE PAINTING, LLC**Current Principal Place of Business:**804 DUQUE ROAD  
N/A  
LUTZ, FL 33549**Current Mailing Address:**804 DUQUE ROAD  
N/A  
LUTZ, FL 33549 US**FEI Number:** 13-4341330**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LAURA L. WALKER, ATTORNEY AT LAW  
307 SOUTH FIELDING AVENUE  
SUITE 1  
TAMPA, FL 33606 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 WADE, PAUL A  
Address 804 DUQUE ROAD  
City-State-Zip: LUTZ FL 33549Title MGR  
Name WADE, PAUL A  
Address 804 DUQUE RD  
City-State-Zip: LUTZ FL 33549Title MGR  
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Address 804 DUQUE RD  
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Address 804 DUQUE RD  
City-State-Zip: LUTZ FL 33549Title MGR  
Name WADE, PAUL A  
Address 804 DUQUE RD  
City-State-Zip: LUTZ FL 33549

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAUL ALAN WADE**OWNER****04/12/2013**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date