2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# 409604

Entity Name: L & L COATINGS CORPORATION

Current Principal Place of Business:

5102 SANTA FE ROAD
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

5102 SANTA FE ROAD
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-1432797 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LINVILLE TERRY O.
13009 SEA PINES WAY
RIVERVIEW, FL 33569 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PVD	( ) Delete
Name:	LINVILLE, TERRY O.,	
Address:	13009 SEA PINES WAY	
City-St-Zip:	RIVERVIEW, FL 33569	
Title:	ST	( ) Delete
Name:	LINVILLE, CHERYL A,	
Address:	13009 SEA PINES WAY	
City-St-Zip:	RIVERVIEW, FL 33569	
Title:	D	( ) Delete
Name:	LINVILLE, HAROLD G	
Address:	13106 AMBROSE PLACE	
City-St-Zip:	RIVERVIEW, FL 33579	
Title:	D	( ) Delete
Name:	KNIGHT, JIM DR	
Address:	1905 BELL RANCH ST	
City-St-Zip:	BRANDON, FL 33511	
Title:	D	( ) Delete
Name:	LINSKY, BILL	
Address:	4851 GANDY BLVD.	
City-St-Zip:	TAMPA, FL 33611	
Title:	D	( ) Delete
Name:	GREEN, BRIAN	
Address:	11145 SIERRA PALM CT.	
City-St-Zip:	FORT MYERS, FL 33966	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	
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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRY O. LINVILLE PVD 01/15/2009

Electronic Signature of Signing Officer or Director Date