

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000008768

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** VISUAL EFFECTS PAINTING & DECORATING, L.L.C.

**Current Principal Place of Business:**

2880 PONKAN SUMMIT DRIVE  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 1098  
APOPKA, FL 32704

**New Mailing Address:**

2880 PONKAN SUMMIT DRIVE.  
APOPKA, FL 32712

**FEI Number:** 52-2337005

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAWYER, DANIEL  
VISUAL EFFECTS PAINTING & DECORATING  
2880 PONKAN SUMMIT DRIVE  
APOPKA, FL 32712 US

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

SAWYER, DANIEL H II  
VISUAL EFFECTS PAINTING & DECORATING  
2880 PONKAN SUMMIT DRIVE  
APOPKA, FL 32712 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: DANIEL H. SAWYER II

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SAWYER, DANIEL H II  
Address: 2880 PONKAN SUMMIT DRIVE  
City-St-Zip: APOPKA, FL 32712

I hereby 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: DANIEL H. SAWYER II

MGR.

04/19/2011

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