

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90140 031 ****50.00

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01192007 Chg-LLC CR2E083 (12/06)

DOCUMENT # L01000017142 1. Entity Name STUART PAINTING SERVICES, LLC																											
Principal Place of Business 49 SW SEMINOLE STREET SUITE 102 STUART, FL 34994		Mailing Address 49 SW SEMINOLE STREET SUITE 102 STUART, FL 34994																									
2. Principal Place of Business - No P.O. Box # 38 SE Ocean Blvd <small>Suite, Apt. #, etc.</small>		3. Mailing Address 38 SE Ocean Blvd <small>Suite, Apt. #, etc.</small>																									
City & State Stuart, FL <small>Zip</small> 34994 <small>Country</small> Martin		City & State Stuart, FL <small>Zip</small> 34994 <small>Country</small> Martin																									
4. FEI Number 65-1139693		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		6. Name and Address of Current Registered Agent GULICK CONSTRUCTION CO., INC 49 SW SEMINOLE STREET SUITE 102 STUART, FL 34994																									
7. Name and Address of New Registered Agent Name Gulick Construction Co., Inc. Street Address (P.O. Box Number is Not Acceptable) 38 SE Ocean Blvd City Stuart FL <small>Zip Code</small> 34994		8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE - Same Agent - N/A <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																									
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">MGRM</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>GULICK CONSTRUCTION CO., INC</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>49 SW SEMINOLE STREET SUITE 102</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>STUART, FL 34994</td> <td></td> </tr> </table>		TITLE	MGRM	<input type="checkbox"/> Delete	NAME	GULICK CONSTRUCTION CO., INC		STREET ADDRESS	49 SW SEMINOLE STREET SUITE 102		CITY-ST-ZIP	STUART, FL 34994		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">MGRM</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Gulick Construction Co., Inc</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>38 SE Ocean Blvd</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Stuart, FL 34994</td> <td></td> </tr> </table>		TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Gulick Construction Co., Inc		STREET ADDRESS	38 SE Ocean Blvd		CITY-ST-ZIP	Stuart, FL 34994	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: [Signature] <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>																									
Date 3/15/07		Daytime Phone # (742) 287-6000																									