

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 05, 2004 8:00 am
Secretary of State

03-17-2004 90274 039 ****50.00

DOCUMENT # L01000019363

1. Entity Name
TSR PAINTING, LLC



Principal Place of Business
**3916 MARLBOROUGH PLACE
SARASOTA, FL 34241**

Mailing Address
**5900 S. TAMiami TRAIL
SUITE 1
SARASOTA, FL 34231**

31002722



01082004 No Chg-LLC

CR2E083 (1Q/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1150671

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TRACY, CATHERINE L
5900 S. TAMiami TRAIL
SUITE 1
SARASOTA, FL 34231**

**DO NOT WRITE
IN THIS SPACE**

B. 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

Catherine L. Tracy

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-20-04

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

MANAGING MEMBERS/MANAGERS

TITLE
MGR
NAME
RUPPEL, TIMOTHY SCOT
STREET ADDRESS
3916 MARLBOROUGH PLACE
CITY-ST-ZIP
SARASOTA, FL 34241

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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 AND TYPED OR PRINTED NAME OF BOOKING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-2-04